

**AGENDA**  
**CLARK COUNTY COMBINED HEALTH DISTRICT**  
**BOARD OF HEALTH**  
**March 17, 2022**  
**6:00 p.m.**

1. Call Meeting to Order
2. Roll Call
3. Minutes of the February 17, 2022 Meeting
  - Presentation to Former Board Members
4. Activity Reports:
  - A. Nursing Division (*Christina Conover*)
  - B. Environmental Division (*Larry Shaffer*)
  - C. Early Childhood (*Lori Lambert*)
  - D. Women, Infants, & Children (*Emily Thomas*)
  - E. Health Planning (*Chris Cook*)
  - F. Vital Statistics (*Shannon Hackathorne*)
  - G. Financial Report (*Lindsey Hardacre*)
  - H. Legislative Update (*Charles Patterson*)
5. Monthly Vouchers (*Lindsey Hardacre*)
  - A. Payment Approval
  - B. Transfers/Advances, if necessary
  - C. Then & Now Requests, if necessary
6. Public Comment
7. Special Report – YRBS (*Brenna Heinle*)
8. Old Business
  - A. Nuisance Abatement Cost Certifications (*Larry Shaffer*)
    - (1) 4701 High Street
    - (2) 2159 Duquesne Avenue
9. New Business
  - A. Possible Solid Waste Nuisance – 2728 Dale Avenue (*Larry Shaffer*)
  - B. Possible Sewage Nuisance – 532 Aberfelda Drive (*Larry Shaffer*)
  - C. Sewage Variance Request – 5386 Enon-Xenia Road (*Larry Shaffer*)
  - D. 2023 Budget Approval (*Lindsey Hardacre*)
  - E. Get Vaccinated Ohio grant submission (*Christina Conover*)
  - F. Audiometer Equipment Purchase (*Christina Conover*)
  - G. Diversity, Equity & Inclusion (DEI) Statement (*Christina Conover*)
  - H. Clark County Fair Booth Contract (*Chris Cook*)
  - I. Annual Report Acceptance (*Shannon Hackathorne*)
  - J. Generator Repair Quote (*Charles Patterson*)
  - K. HVAC Repair Quote (*Charles Patterson*)
  - L. SnapEd MOU (*Emily Thomas*)
  - M. Position Upgrade – Natalie Oliver (*Lori Lambert*)
10. Health Commissioner's Comments
11. Executive Session – if necessary
12. Additional Business – if necessary
13. Next Meeting Date – Thursday, April 21, 2022

Adjournment

Clark County Combined Health District  
Board of Health Minutes  
February 17, 2022

Board members present: Catherine Crompton, Valerie Moore, Dala DeWitt, Tyler Walters, Dana King and Bernadette deGuzman.

Board members absent: Scott Griffith.

Staff present: Charles Patterson, Health Commissioner; Elizabeth DeWitt, Environmental Health Supervisor; Christina Conover, Director of Nursing; Emily Thomas, WIC Director; Shannon Hackathorne, Administrative Assistant to the Health Commissioner; Lindsey Hardacre, Fiscal Officer; Chris Cook, Assistant Health Commissioner; Stephanie Johnson, Emergency Preparedness Coordinator; Nate Smith, Communications Coordinator and Anna Jean Sauter, Supervisor of Assessment and Surveillance.

Others present: Ms. Heather Chappell, citizen and Mr. Sam George, citizen.

Minutes: The minutes of the Board of Health meeting held on January 20, 2022 were approved as submitted.

### **Activity Reports**

Nursing: Ms. Conover said the temporary testing site will close at the end of the day tomorrow. She said that having the Ohio National Guard for the past couple weeks has been a great partnership and experience and we are grateful for their assistance. She said that March 1, 2022, will be our last day at the COVID-19 Vaccination Center on Leffel Lane. She advised that we will transition to smaller community clinics for COVID-19 vaccinations. She said that cases have continued to drop which has allowed us more time to work on communicable disease outbreaks.

Ms. Conover said that we are working on being able to offer the rabies vaccine. She said that earlier this year there was an MMWR article that discussed three (3) fatalities regarding bat exposures. She said though the incidence is low the outcome is almost always fatal, so we are moving this higher on our priority list. She said that anyone with exposure needs to have an evaluation of the bite or scratch and the first vaccine soon. She said that further evaluation can be made based on the determination of whether the animal needs to be observed or euthanized and tested. She said the immediate need is usually handled by the hospital, but we were finding that there was not an opportunity for a local option to continue the post exposure prophylaxis series. She said that we are exploring this to ensure that we can make this a sustainable project since the rabies vaccine is particularly expensive and, in most cases, people do not have medical coverage for the treatment. She said we have received some requests for pre-exposure from people going into school for veterinary medicine. She said that we are still working to navigate the pre-exposure prevention vaccines as well and asked for feedback.

Environmental Health: Ms. Elizabeth DeWitt said that current licenses for food services and establishments expire at the end of this month. She said that we sent renewals out at the end of January and have received approximately 50% of the applications and fees back. She said that as we approach the end of February we begin calling and visiting the establishments that we have not received them from. She said that we are also working to get all the retail tobacco facilities within the City of Springfield licensed. She said that staff visited several facilities last week and were able to collect a few fees and

remove some of the facilities that were not licensable. She said that we hope to have the last few collected by the end of this month.

Ms. DeWitt said that we are working on finishing a continuous quality improvement project that will work to educate homeowners regarding their household sewage treatment discharging system in hopes that we can reduce the amount of raw sewage being discharged to the environment. She said that we hope to report back on that project soon.

Ms. DeWitt said that our public campgrounds and swimming pool programs are being surveyed by the Ohio Department of Health. She said they are surveying licensing years 2018, 2019 and 2020 for campgrounds and licensing years 2019 and 2020 for swimming pools. She said that our environmental health specialists had the field portion of the survey yesterday, so we were thankful for the beautiful February day.

Mr. Walters asked how the facilities received the need for the tobacco retail license. Ms. Elizabeth DeWitt said many did not understand the need for another license, but once we explained the purpose behind Tobacco 21 many seemed to understand.

Early Childhood: Ms. Lambert said that all our programs except for Cribs for Kids will return to home visiting in person. She said that with the Cribs for Kids program we found that we made a lot of progress streamlining the program using the virtual platform. She explained that previously the family would call to schedule an in-class visit and now when they call, we establish availability, send them two (2) videos to watch, have them call to check their comprehension, answer questions and they tell us their plan to help their baby stay while sleeping and then come pick up their pack n play. She advised that we get the pack n play to them another way if there is a transportation barrier. She said that Ms. Mary Kopp has done a great job with the program and Ms. Nina St. Luce with WIC has been a great resource for promoting the program.

WIC: Ms. Thomas said there was a slight dip in the caseload from the child category, however, even with the dip our project remains above the assigned caseload for the fourth month this fiscal year. She said that staff have worked diligently to contact families who missed appointments to reschedule as well as scheduling appointments when they are referred to us by other community agencies. She said that we cannot thank the staff enough for all their work to increase caseloads.

Health Planning: Mr. Cook referred to the lead safe home program on the last page of the report included in the board packet. He said that this program is not new to Clark County. He said about 10 years ago this was a well-executed program, but unfortunately loss of funding did not allow us to continue as we wanted. He said with some additional funding from the Ohio Department of Health you can see some of the initiatives we are starting and in a re-learning phase. He said that we are talking with experts in the state that have well executed programs such as Cleveland and Toledo. He said that most people understand that lead is a problem and there is no safe level of lead in the body. He said the coalition is starting to take initial form and we know that we need other partners in the community to maximize our outreach. He said that lead was used very frequently in paint until 1978 so most of the exposure for children comes through dust and chips. He said that lead replaces calcium and iron in the body and can lead to learning and developmental delays. He said that 2.5% of the population in the United States is estimated to have a blood level above the action level which is five (5) micrograms for deciliter. He said in Ohio once the test comes back about this amount the person is automatically enrolled in Ohio early intervention program. He said if the level comes back above ten (10) then a risk assessment of the home and places the person

frequents is initiated. He said that case management is one piece of this program which is performed through nursing and the other piece is policy and infrastructure building which is what we are trying to do. He said that we are in the prevention business, and we are trying to raise awareness not only of the general public but our providers as well to ensure they are doing blood lead level testing at the appropriate frequency. He said when we look at the data from 2016 through last year, we have had several people tested but we need to increase that. He said in 2021 only 22% of the total births in the county were tested. He said that does not necessarily mean that we are missing 75% as testing is typically done at 12 months, 24 months and under age 6, but if we assume that those born in 2020 were tested at the 12-month interval in 2021 that is still a level much lower than we want to see. He said that we want to see more testing as we do not believe we know the full scope of the problem in Clark County.

Mr. Cook referred to the progress report on our initiatives for the Community Health Improvement Plan included in the board packet. He said that we did a news interview with the Springfield News Sun on our progress of the next Community Health Assessment. He said we had a great conversation and are happy to see that recognition and awareness level in the public as they will read about that. He referred to the task, timeline and responsibilities of the next phase of the Community Health Assessment and Community Health Improvement Plan that is included in the board packet as well. He said that a couple milestones and something that we are going to try to push more in this next cycle will be public information sharing, staff information sharing and board information sharing. He said that we want to make sure people are seeing progress along the way versus just seeing the final product so we will highlight something to board each month and engage our staff in different areas to ensure they are aware and updated on the progress of the Community Health Assessment & Community Health Improvement Plan. He said that we hope to have all the raw data pulled together with some very broad priority directions teased out of that data by May of this year with publication of the final document in July of 2022. He said we then want to take that on the road to share with the public to get input on where we are heading and what our health initiatives will be for the next three (3) years.

Mr. Cook said that Clark County is one of five (5) counties selected in the state to pilot the Data First project with the ODH where we put data first in looking at the areas of our population here in Clark County that may be better served by strategic changes in how we are offering the COVID vaccine. He said that we just had a presentation with the ODH today and developed four (4) short term goals including capitalizing on all the vaccine providers in the county, target certain census tracks that meet criteria for case rates, hospitalizations and low vaccination started rates, target some of our food pantries and high-risk schools. He said that we discovered over the last three (3) weeks that while the Clark County Combined Health District (CCCHD) was the top vaccine provider in the county, the pharmacy system was vaccinating three (3) people to each one (1) that we were vaccinating meaning 70% of the vaccines received by residents of Clark County were received by the pharmacy system at this time. He said that we came in at about 24% and about 8# with other providers. He said we launched a campaign to get information from the pharmacy providers including how much longer they plan to provide vaccines and the process for scheduling. He said that we pull all this data together and the next step will be to provide the data to the public so they can obtain vaccines anywhere they choose. He said the next highlight is the census tracks. He said we looked at the data from the ODH and teased out three (3) census tracks including 2, 12 and 14. He said that we looked at the data for the greatest hospitalization rate per 100,000, the greatest number of cases per 100,000 and the lowest percentage of vaccines started and teased those census tracks out of the data. He said that it was very interesting once we saw that data to look at the resources and assets that were already in those census tracks. He said this allowed us to hit the ground running with some of these

initiatives. He said census track 2 is where RHC is located so we are partnering with them to do some local marketing and even going door to door to see if people would like to get the vaccine at the RHC. He said moving to census track 12 it was interesting to find that this is where we already have an office so we moved quickly and opened a vaccine clinic on Fridays at our Sothern Village location completing 16 doses in the last two (2) weeks with nine (9) being first doses. He said that we are working on getting incentives including a partnership with Caresource and Molina to join us at these sites. He said that Groceryland is located in census track 12 and is now home to one of our vaccine clinics. He said that we had our first clinic there today and will continue to be there once per week. He said that we hope that this will become a gateway to future partnerships specifically with Groceryland as they are serving a high-risk population. He said that we had multiple assets in census track 14 including our WIC and Early Childhood location as well as our COVID-19 testing center. He said that we opened a vaccine clinic at our WIC/EC building on Wednesday with the specific target of serving those served by these programs. He said the goal was to partner with the trusted relationship our families have with WIC and Early Childhood, and we have already completed 21 doses with 13 being first doses. He said that we hope to expand this with the push being a convenient drive-thru clinic for families beyond those we currently serve. He said that we are scheduled to be at St. Johns Missionary Baptist food pantry and Family Needs pantry in the coming weeks and are working to partner with the Good Samaritan pantry and Second Harvest food bank to offer vaccines. He said that we had our first school-based clinic as part of this initiative today which was in Lincoln. He said that we will be back there on March 3, 2022 and will be at Kenwood School next week as these schools are adjacent to census track 12. He said that our next steps are to measure these impacts by seeing if they are effective and pivoting if needed. He said that the Governor is very interested in the results and hopefully they will be able to use Clark County as a shiny tool of how things should be done.

Vital Statistics: Ms. Hackathorne noted that we had 65 COVID-19 deaths reflected in this report, otherwise there is nothing new or unusual to report this month. She said that our fiscal clerk and one of our WIC support staff will be out on extended medical leave, so we plan to use some of our PRN staff to help backfill those positions.

Financial Report: Ms. Hardacre referred to the supplemented financial report included in the board packet. She advised that some of the funds we discussed last month have been corrected. She said that we are currently in the audit process with documentation due by February 28, 2022 so we are working to get those documents submitted. Mr. Walters asked if the auditors will come on site. Ms. Hardacre said that we received an extension this year with our external auditors Wilson, Shannon and Snow and they typically complete the audit offsite. She said that next year we will have the state auditors and assume they will come on site.

Legislative Update: Mr. Patterson said that we continue to monitor several anti-vaccination bills including HB218. He said that we hope that the bill does not advance, and we are part of a coalition with the Ohio Hospital Association and other to try to prevent the overreaction to COVID-19 vaccines spilling over to other vaccination programs. He said as Ms. Conover said, prevention is the number one goal of health departments around the state of Ohio. He said one bill that has passed is HB51 which is the public meetings act, and the Governor is signing this week. Between now and June 30, 2022 remote meetings will be legal, the same as in 2020. Mr. Walters asked if meetings are legal through the month of June. Mr. Patterson confirmed that is correct. He said if the case counts for COVID-19 are declining at about 75% in 14 days and we have seen about a 90% decrease in our case counts and rates from our peak in January to today. He said that we have not yet seen a spike from any Superbowl parties which may happen with testing late this week, but the virus appears to be burning itself out, however, if the cases began to rise

remote meetings would be legal. He said that there may be a place for this board later this year to take a position or have an opinion on the recreational use of marijuana. He said that this may be something individual board members want to start researching.

Vouchers: Ms. Hardacre presented the bills.

**R 13-22** A resolution approving payment of the bills from January 1, 2022 through January 31, 2022.

Motioned by: Ms. Moore

Seconded by: Dr. King

Dr. deGuzman	Yes
Mr. Griffith	Absent
Mr. Walters	Yes
Ms. Moore	Yes
Dr. Crompton	Yes
Ms. DeWitt	Yes
Dr. King	Yes

Motion carried.

Transfers/Advances: Ms. Hardacre said that we are requesting a budgeted transfer from the General Revenue Fund to the Environmental Services Fund for \$30,000.00. Mr. Walters asked if this is a normal occurrence. Ms. Hardacre said that our health fund supports the environmental fund. Mr. Patterson noted that when it is budgeted it is something that we planned for and those unbudgeted were unplanned and we should be able to provide an explanation of what has happened differently than we expected.

**R 14-22** A resolution approving a budgeted transfer from the General Revenue Fund to the Environmental Services Fund in the amount of \$30,000.00.

Motioned by: Dr. Crompton

Seconded by: Dr. deGuzman

Mr. Waters	Yes
Ms. DeWitt	Yes
Dr. King	Yes
Ms. Moore	Yes
Mr. Griffith	Absent
Dr. deGuzman	Yes
Dr. Crompton	Yes

Motion carried.

**Public Comment:** Ms. Dala DeWitt turned the floor over to Ms. Heather Chappell who requested to address the board. Ms. Chappell said that she wanted to first ask some questions in regards to the monoclonal antibodies that are being administered. She asked if anyone can share anything with regards to the human source of the antibodies that are used in those treatments. She asked for any information on HEK 293 which is a human embryonic kidney cell that is used in Moderna and AstraZeneca vaccine. She said the third ingredient used in those antibodies as an antibody is a mouse and human genome that has been previously used in chemotherapy agent immunotherapy called vasamune. She said this works great in that chemotherapy shrinking the tumors but within 1-3 years the patients developed cancer all through their body and it ended up failing. She asked if anyone knows or has researched anything about those antibodies used. She said that she also has some questions in regards to the syphilis rises in Clark County. She said in December of 2021 the FDA had a report that came out that said that there is a possibility of a

false positive of syphilis when tested with the BioPlex 2200 syphilis total RPR test kit following a COVID-19 vaccine. She asked if this is something we are aware of regarding the false positive. Ms. Conover confirmed that we are aware of this. Ms. Chappell asked if this is the test, we use to test for syphilis in Clark County. Ms. Conover advised that there are a number of different tests used so we are not sure what other providers use. Ms. Chappell asked if the test numbers for syphilis could in fact be false positives or do we follow up with the other test. Ms. Conover advised that all tests are followed up with the other tests and everything that is reported has a confirmatory lab draw. She said that syphilis had already been on the rise in Clark County prior to any COVID-19 vaccine being available so it seems that the trend is that it continues to be a rise and it would be unexpected if it had not already been rising prior to the any available vaccine.

Ms. Dala DeWitt thanked Ms. Chappell for her comments and said that if she would like to submit any additional questions they would be reviewed by the board and included in the minutes.

Ms. Dala DeWitt turned the floor over to Mr. Sam George who requested to address the board. Mr. George said that some of his questions may be answered later in the agenda, but his biggest concern is that currently each taxpayer's share of indebtedness is \$240,000.00. He said that we need to think about that, \$240,000.00. He said that he does not mind helping people and he was a firefighter and paramedic volunteer for 12 years spending a lot of time away from his family. He said that back in November of 2021 we indicated there were over 100 new students in the city schools primarily of the Haitian decent and he asked if interpreters have been hired and who is paying for them. Ms. Dala DeWitt advised that three (3) interpreters have been hired and they are paid for by Springfield City Schools. He said with Springfield City schools being saddled with that cost he wonders what fund source this is coming from, the local taxes or federal taxes. Ms. Dala DeWitt advised that he would want to follow up with the Springfield City Schools. He asked who is paying for the housing of the increasing Haitian population and for suggestions of where he can find this information. Mr. Patterson advised that the Haitian population are working and paying for housing with that funding. Mr. George said again he has to refer back to the indebtedness number which is going to break our country.

Ms. Dala DeWitt thanked Mr. George for his comments.

**Special Report – Infectious Disease Trends:** Ms. Anna Jean Sauter referred to the communicable disease summaries included in the board packet. She said that these are summaries that we have asked our CDC epidemiologist to look into for us after looking at the annual report. She said that we are really thankful to have our CDC epidemiologist as she was able to take a deeper dive into each of the diseases. She said the first summary is campylobacter which is a bacterial and gastrointestinal illness. She said there has been a slight decrease in the campylobacter cases in Clark County over the past five (5) years beginning in 2020 and 2021 which could be attributed to non-essential testing dipping during the pandemic. She said the next summary is chlamydia which is a sexually transmitted disease that affects both men and women. She said cases of chlamydia have been decreasing in Clark County over the past several years. She said that there is a racial disparity with chlamydia in our county with the Black/African American race accounting for 22.4% of the chlamydia cases and when compared to the total percent of the population the Black/African American population is only 9% which is a large disparity. Dr. deGuzman asked if we have seen any difference in the volume of activity in our clinic correlating with these trends. Ms. Conover said that we continue to trend upwards in activity in our reproductive health clinic which we attribute to the fact that we are going to multiple locations and doing a large amount of outreach and partnerships. Ms. Moore asked if all sexually transmitted diseases are reportable. Ms. Sauter advised that not all are

reportable, but chlamydia, gonorrhea and syphilis are reportable. Ms. Moore asked if that goes for private providers as well. Ms. Sauter confirmed that these are reported by all providers in Ohio. Ms. Sauter said that aside from COVID-19, chlamydia and gonorrhea are the top two (2) reportable conditions in Clark County. Ms. Sauter said that brings us to the next summary which is gonorrhea which has increased slightly the past five (5) years with the exception of a small dip in 2021. She said as with chlamydia there is a racial disparity in our gonorrhea cases showing 29.4% cases being Black/African American. Ms. Moore said knowing that chlamydia is extremely hard to get rid of are these new individual cases or recurring cases Ms. Sauter said that one individual may have multiple infections and she is not sure of the case definition, but she believes that if you test positive after a certain timeframe following treatment it can be counted as another infection. She said that she will check that and follow up. Ms. Moore asked if we have the same breakdown for syphilis. Ms. Sauter said that our CDC epidemiologist is working on that. She said that she is going through our annual report and going through each disease one by one and these are the first six (6) from the report. She said the next summary is influenza associated hospitalizations and noted that the only flu related cases required to be reported in Ohio are the flu associated hospitalizations, not all flu cases are reportable. She said the number of hospitalizations over the past five (5) flu seasons. She said that flu season begins in October, but most of our cases are seen between October, November, March and April. She said the number of flu related hospitalizations has decreased significantly noting that 2020-2021 and 2021-present 2022 flu season the cases are low, which we believe is attributed to social distancing and mask wearing along with the risk measures everyone is following. She said that flu and COVID-19 tests are completed on all patients coming to the hospital with respiratory symptoms so we do not believe the decrease is attributed to less testing. She said the next summary is another respiratory illness, legionnaire disease, which is bacterial pneumonia. She said these cases have been drastically increasing over the past five (5) years. She said that back in 2020 before the whirlwind of COVID-19 we started to look at legionella to try to figure out what was going on. She said that we began to look at 2017-2019 and noticed that a majority of the cases were within the city of Springfield so some were on private water systems but most were public. She said that as far as we can tell nothing was related but this is definitely something that we will begin to take a closer look at. She said the last summary is Lyme disease, which is one of our zoonotic diseases transmitted by the black legged tick. She said that cases over the past five (5) years have slightly increased. She said that we believe some of this is attributed to people spending more time outside. She noted that a majority of our cases are suspected cases which is because it takes very specific lab tests with symptoms to become a confirmed case.

**Old Business:** none

**New Business:**

Tobacco Grant Submission: Mr. Cook referred to summary included in the board packet which is four (4) pages from the Ohio Department of Health document that allows us to apply for tobacco use cessation dollars. He said that this is a competitive application cycle and the grant period will last until June 30, 2023. He referred to appendix C1E which defines the deliverables that we have to execute to receive the funding and what the grant addresses. He said that there are seven (7) deliverables with timeframes outside of the grant period. He said this is a competitive cycle but there are also non-competitive cycles and as long as you are executing on your work plan you can automatically apply and receive those dollars again. He said that we are budgeted and applying for \$132,000.00 with a 2022-2023 workplan. Mr. Walters asked what the odds are that we will receive this grant. He said that Clark County is in a very good position based on our past work to receive this funding. Mr. Walters asked if this funding will require additional staffing. Ms. Hardacre said there are certain percentages of staff currently working on the grant



with at least one full-time staff member. Mr. Walters asked if this is strictly for the state of Ohio. Mr. Cook confirmed that this grant is for the state of Ohio.

**R 15-22** A resolution authorizing the Health Commissioner to do all things necessary including submitting the grants and negotiating and executing all related contracts for 2022 Tobacco grant.  
Motioned by: Mr. Walters  
Seconded by: Dr. King

Dr. Crompton	Yes	
Mr. Griffith	Absent	
Dr. King	Yes	
Ms. Moore	Yes	
Ms. DeWitt	Yes	
Dr. deGuzman	Yes	
Mr. Walters	Yes	Motion carried.

Community Health Foundation Grant Submissions: Ms. Conover said that we submitted three (3) applications to the Community Health Foundation. She said the first was a \$20,000.00 grant request for funding for the reproductive health services at the jail. She said that when people are incarcerated, they are not covered under medical plans so those services are not able to be billed and reimbursed so this funding helps sustain that program, which is an important program for the county. She said the second request was for the condom distribution program. She said that we have always distributed free condoms where it was convenient through the reproductive health clinic and our front desk, but we want to be more targeted. She said that a few months ago we began to partner with a couple of local bars to make condoms more available and we want to continue that outreach using some of the concepts of evidence-based condom distribution practices. She said that this grant request was \$5,000.00. She said that this program is also part of the Community Health Improvement Plan so we are excited for that alignment. She said the third grant request was \$14,000.00 for AED purchases and CPR training for churches that are part of the faith community nursing program.

**R 16-22** A resolution authorizing the Health Commissioner to do all things necessary including submitting the grants and negotiating and executing all related contracts to the Community Health Foundation for jail services and condom distribution program enhancements and AEDs for the faith community nursing program.  
Motioned by: Dr. deGuzman  
Seconded by: Dr. Crompton

Ms. Moore	Abstain	
Mr. Walters	Yes	
Dr. King	Yes	
Dr. deGuzman	Yes	
Dr. Crompton	Yes	
Ms. DeWitt	Yes	
Mr. Griffith	Absent	Motion carried.

NACCHO Medical Reserve Corp Grant Submission: Ms. Conover said that we are pleased that Ms. Sandy Miller asked to submit this grant. She said that Ms. Miller is our Medical Reserve Coordinator. She said that after COVID-19 this helps us look at this capacity in a whole new light as we did use our Medical

Reserve Corp volunteers to help us sustain the COVID-19 response in many capacities. She said that this allows her to spend more time recruiting and working on sustainability of volunteers.

**R 17-22** A resolution authorizing the Health Commissioner to do all things necessary including submitting the grant and negotiating and executing all related contracts to NACCHO for Medical Reserve Corp enhancements.

Motioned by: Ms. Moore

Seconded by: Mr. Walters

Ms. Moore Yes

Mr. Walters Yes

Dr. Crompton Yes

Dr. deGuzman Yes

Mr. Griffith Absent

Dr. King Yes

Ms. DeWitt Yes

Motion carried.

Haitian Creole Grant Submission: Mr. Cook said that as mentioned in the past we have a growing and rooted population of Haitian immigrants in Clark County. He said that while the 2022 US Census does not define the number of people here for us, according to numerous county officials that current population here in the county is estimated to be in the 1000s. He said that we believe these refugees are anxious to make Springfield and Clark County their new multi-generational location to live, work and play. He said as part of this growing population we currently have no unified approach to serve the unique health needs of this population. He said they have both unique social and health needs that need to be addressed in an equitable way as we know health equity truly can be achieved when everyone has the same opportunity to achieve their full stability for health. He said one of the things that has been a challenge to not only the Clark County Combined Health District (CCCHD) but many other agencies including our schools is how to serve this growing population. He said that there is quite a bit of interest in the different social service agencies to serve this population in some manner, but we are strongly to understand how we can best do that. He said that we do have a unique opportunity with the Ohio Department of Health to create what we are calling a Clark County Haitian Connection or Hub. He said the purpose of this hub is much more than translators. He said it will be a very important of the resources that are here, but much more than overcoming the communication barrier, including understanding the culture and unique needs of the population to achieve health equity. He said this opportunity has been talked about with the Ohio Department of Health with credit to Ms. Conover who pitched the idea and helped carry the conversation forward. He said that we believe that this will be an opportunity to create connections to housing, places to work, worship, transportation and literacy along with health equity opportunities. He said that some of this is undefined and we cannot say how many dollars we are applying for, but we are hopeful that it will be in the range of \$75,000 to \$100,000 to create this hub. He said that we have many other partners interested in the county including the schools. He said that we have had conversations with the executive director of St. Vincent de Paul and they already serving this population so we do not want to recreate something that already has a foothold here in the community such as St. Vincent de Paul and the schools but rather get those people around the table to allow us to have someone as a hub coordinator that can work with all the social service agencies to serve this population with what they need. He said when measuring outcomes and successes we are working to create some measurable deliverables with some

ideas being to pull at least seven (7) social service agencies together to offer services and determining the appropriate number of encounters with the families in the county. He said we are still working the flesh out, but we would like to be able to apply for that grant as soon as the Ohio Department of Health provides us with the ability to do so. Mr. Walters asked if the Ohio Department of Health will tell us the amount that is available under the grant and if they are onboard with understanding that we do have the influx of population. He said that we have the same thing at the hospital with patient care issues and have to hire interpreters. Mr. Cook confirmed that the Ohio Department of Health will notify us of the amount of funding available and they have acknowledged the need for this hub. Mr. Walters said it was mentioned that this population is refugees and asked if that is the correct term or are they seeking citizenship and how much do we know about the population. Mr. Cook said that his assumption is that we have a spectrum of where they are in that process. Mr. Patterson said that a majority of the people we are aware of entering the county now have already been in the United States for some time and are relocating here. He said there are a few that we have heard are coming here because they know people who have been here and migrated to Clark County. Mr. Patterson said that we have been cultivating a relationship with Ms. Lilly Cavanaugh who is the executive director for the Ohio Commission on Minority Affairs and Ms. Tiffany Huber at the Ohio Department of Health and they have taken hold of this. He said the reason they are not sure about funding amounts is because this will be the only grant in the state for these opportunities as they are trying to figure out how this will work. Mr. Walters asked us if that will allow us to partner with schools and healthcare systems. Mr. Patterson confirmed that is correct. Mr. Cook said that there is a one-page document that will help explain what this will look like and that we will share with the board. Ms. Moore asked how this is different than what we are seeing in other areas and other backgrounds that are coming into the community being supported. Mr. Cook said that with our Haitian population swelling so quickly in such great numbers we have to have something specifically to address this population. He said that we think it is something we are learning to see what model will work to address this rapidly growing population.

**R 18-22** A resolution authorizing the Health Commissioner to do all things necessary including submitting the grant and negotiating and executing all related contracts to the Ohio Department of Health/Community Health Foundation for Haitian Creole resource programming.

Motioned by: Dr. deGuzman

Seconded by: Dr. Crompton

Ms. Moore	Yes	
Mr. Walters	Yes	
Dr. King	Yes	
Dr. deGuzman	Yes	
Dr. Crompton	Yes	
Ms. DeWitt	Yes	
Mr. Griffith	Absent	Motion carried.

**Health Commissioner’s Comments:** Mr. Patterson said that we are making progress in finding a leader for the homelessness task force, having had some serious conversations to move that forward and hope to report that we have someone at next month's meeting.

**Additional Business:** none

The next regular Board of Health meeting will be held Thursday March 17, 2022 at 6:00 p.m. at 529 East Home Road, Springfield, Ohio.

With no further business to come before the Board, the meeting adjourned at 7:07 p.m.

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Charles A. Patterson, Secretary  
Clark County Combined Health District  
Board of Health

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Dala DeWitt, President  
Clark County Combined Health District  
Board of Health

PROGRAM:	Feb'22	YTD '22	PROGRAM:	Feb'22	YTD '22	PROGRAM:	Feb'22	YTD '22
<b>C&amp;DD-Active:</b>			<b>DOMESTIC PREPAREDNESS:</b>			<b>FOOD-MOBILE:</b>		
Consultations	2	4	Complaints/Consultations	0	0	Consultations	9	10
Enforcement	0	0	Field Activity <b>Hours</b> (Clinics, Etc.)	0	140.5	Licenses Issued:		
Licenses, Permits, Orders Issued	0	0	Inspections/Re-Inspections	0	0	Food Establishment	0	0
Inspections &/or Re-Inspections	0	1	Sample/Re-Sample	0	0	Food Service	5	5
<b>C&amp;DD-Closed:</b>			Sample or Specimen Pick-Up/Delivery	0	0	Inspections-Standard	0	1
Consultations	0	0	Training-Given	0	0	Notices of Critical Viol.-Standard Insp.	0	0
Enforcement	0	0	Training-Received	0	0	Follow-Up Inspections	0	0
Inspections &/or Re-Inspections	0	0	<b>FOOD-RISK (144):</b>			Complaints Rec'd./Investigated/FU/Pend.	0	0
<b>CAMPGROUNDS (182):</b>			<b>PLAN REVIEW</b>	14	32	<b>FOOD-TEMPORARY:</b>		
Consultations	0	1	Consultations	17	29	Consultations	0	0
Licenses Issued	0	0	Licenses Issued:			Licenses Issued:		
Inspections-Standard	1	1	Food Establishment	145	147	Food Establishment	13	19
Licenses Issued-Temporary	0	0	Food Service	318	318	Food Service	2	2
Inspections-Temporary	0	0	Inspections-Food Establishment:			Inspections-Standard	9	14
Notices of Critical Viol.-Standard Insp.	0	0	Standard Inspections	1	25	Notices of Critical Viol.-Standard Insp.	0	0
Re-Inspections	0	0	PR Inspections	0	2	Follow-Up Inspections	0	0
Complaints Pending-Beg. Of Month	0		Notices of Critical Viol.-Stand./PR	0	0	Complaints Rec'd./Investigated/FU/Pend.	0	0
Complaints Rec'd.-Current Month	0	0	Follow-Up Inspections	9	19	<b>FOOD-VENDING:</b>		
Complaints Investigated:			Outbreak Investigations:	0	0	Consultations	0	0
Valid Complaints	0	0	Sample or Specimen Pick-Up/Delivery	0	0	Licenses Issued	38	38
Notices of Violation Sent	0	0	Inspection/Sample	0	0	Inspections-Standard	0	17
Summary Compliance Abated	0	0	Inspections-Food Service:			Inspections - Misc	0	0
Non-Valid Abated	0	0	Standard Inspections	20	76	Notices of Critical Viol.-Standard Insp.	0	0
Complaint Re-Inspections	0	0	CCP Inspections	7	46	Follow-Up Inspections	0	0
Complaints Pending-End of Month	0		Notices of Critical Viol.-Stand./CCP	0	0	Complaints Rec'd./Investigated/FU/Pend.	0	0
Outbreak Investigations	0	0	Follow-Up Inspections	15	41	<b>INDOOR AIR QUALITY:</b>		
Orders to Appear before CCCHD	0	0	Outbreak Investigations:	0	0	Consultations	11	21
BOH Orders Issued	0	0	Sample or Specimen Pick-Up/Delivery	0	0	Inspections &/or Re-Inspections	4	5
Citations to Appear before BOH	0	0	Inspection/Sample	0	0	<b>INFECTIOUS WASTE:</b>		
Plan Review	0	0	Complaints Pending-Beg. Of Month	3		Consultations	0	2
<b>CLEAN FILL OPERATION:</b>			Complaints Rec'd.-Current Month	15	20	Enforcement	0	0
Complaints	0	0	Complaints Investigated:			Inspections &/or Re-Inspections	1	1
Consultations	0	0	Valid Complaints	4	6	<b>INSECT/RODENT (146):</b>		
Enforcement	0	0	Notices of Violation Sent	0	0	<b>Bed Bugs:</b>		
NOITF, Orders Issued	1	1	Summary Compliance Abated	1	1	Consultations	0	4
Inspections &/or Re-Inspections	1	1	Non-Valid Abated	10	13	Inspections &/or Re-Inspections	0	0
<b>COMPOSTING FACILITY:</b>			Complaint Re-Inspections	4	6	Consultations-Insect/Rodent	0	0
Consultations	1	2	Complaints Pending-End of Month	5		Complaints Pending-Beg. Of Month	2	
Enforcement	0	0	Orders to Appear before CCCHD	0	0	Complaints Rec'd.-Current Month	1	1
Licenses, Permits, Orders Issued	0	0	BOH Orders Issued	0	0	Complaints Investigated:		
Inspections &/or Re-Inspections	2	3	Citations to Appear before BOH	0	0	Valid Complaints	0	0
			Citations into Court	0	0	Notices of Violation Sent	0	0

PROGRAM:	Feb'22	YTD '22	PROGRAM:	Feb'22	YTD '22	PROGRAM:	Feb'22	YTD '22
<b>INSECT/RODENT (cont'd.):</b>			<b>MERCURY (199):</b>			<b>NUISANCES-OTHER (cont'd.):</b>		
Summary Compliance Abated	0	0	Consultations	0	0	Complaint Re-Inspections	0	0
Non-Valid Abated	1	1	Enforcement/NOV	0	0	Complaints Pending-End of Month	0	
Complaint Re-Inspections	0	1	Inspections/Re-Inspections	0	0	Orders to Appear before CCCHD	0	0
Complaints Pending-End of Month			Complaints Rec'd	0	0	BOH Orders Issued	0	0
Orders to Appear before CCCHD	0	0	<b>MOLD:</b>			Citations to Appear before BOH	0	0
BOH Orders Issued	0	0	Consultations	7	11	Citations into Court	0	0
Citations to Appear before BOH	0	0	Inspections &/or Re-Inspections	0	0	<b>NUISANCES-WATER/UTILITIES (160):</b>		
Citations into Court	0	0	<b>MOTORCYCLE OHIO:</b>			Consultations	0	0
<b>JAIL:</b>			# of Classes Conducted	0	0	Complaints Pending-Beg. Of Month	18	
Complaints Rec'd./Investigated/FU/Pend.	0	0	# SUCCESSFULLY COMPLETED: MALE	0	0	Complaints Rec'd.-Current Month	2	2
Consultations	0	0	FEMALE	0	0	Complaints Investigated:		
Enforcement	0	0	MINORS	0	0	Valid Complaints	1	1
Inspections	0	0	# DID NOT PASS: MALE	0	0	Notices of Violation Sent	0	0
Inspection/Sample	0	0	FEMALE	0	0	Summary Compliance Abated	0	0
Re-Inspections	0	0	MINORS	0	0	Non-Valid Abated	1	1
Sample or Specimen Pick-Up/Delivery	0	0	# DROPPED OUT: MALE	0	0	Complaint Re-Inspections	2	5
Outbreak Investigations	0	0	FEMALE	0	0	Complaints Pending-End of Month	19	
<b>LANDFILLS-CLOSED:</b>			MINORS	0	0	Orders to Appear before CCCHD	0	0
Consultations	0	2	<b>NUISANCES-GENERAL ANIMAL (147):</b>			BOH Orders Issued	0	0
Enforcement	0	0	Consultations	0	0	Citations to Appear before BOH	0	0
Inspections &/or Re-Inspections	0	0	Complaints Pending-Beg. Of Month	2		Citations into Court	0	0
<b>LEAD:</b>			Complaints Rec'd.-Current Month	0	0	<b>PLUMBING (141):</b>		
Consultations	6	12	Complaints Investigated:			<b>PLAN REVIEW</b>	7	22
<b>MAN. HOME PARK (180):</b>			Valid Complaints	0	0	Inspections	38	90
Consultations	0	0	Notices of Violation Sent	0	0	Finals	36	64
Inspections-Standard	0	0	Summary Compliance Abated	0	0	Permits	71	134
Notices of Critical Viol.-Standard Insp.	0	0	Non-Valid Abated	0	0	Registrations	26	253
Re-Inspections	0	0	Complaint Re-Inspections	1	6	Backflow Certifications	227	481
Complaints Pending-Beg. Of Month	2		Complaints Pending-End of Month	2		Consultations	5	5
Complaints Rec'd.-Current Month	0	0	Orders to Appear before CCCHD	0	0	Complaints Pending-Beg. Of Month	6	
Complaints Investigated:			BOH Orders Issued	0	0	Complaints Rec'd.-Current Month	1	1
Valid Complaints	0	0	Citations to Appear before BOH	0	0	Complaints Investigated:		
Notices of Violation Sent	0	0	Citations into Court	0	0	Valid Complaints	0	0
Summary Compliance Abated	0	0	<b>NUISANCES-OTHER (149):</b>			Notices of Violation Sent	0	0
Non-Valid Abated	0	0	Consultations	0	0	Summary Compliance Abated	0	0
Complaint Re-Inspections	0	0	Complaints Pending-Beg. Of Month	0		Non-Valid Abated	1	1
Complaints Pending-End of Month	2		Complaints Rec'd.-Current Month	1	3	Complaint Re-Inspections	0	0
Orders to Appear before CCCHD	0	0	Complaints Investigated:			Complaints Pending-End of Month	5	
BOH Orders Issued	0	0	Valid Complaints	0	0	Orders to Appear before CCCHD	0	0
Citations to Appear before BOH	0	0	Notices of Violation Sent	0	0	BOH Orders Issued	0	0
Citations into Court	0	0	Summary Compliance Abated	0	0	Citations to Appear before BOH	0	0
			Non-Valid Abated	1	3	Citations into Court	0	0

<b>PROGRAM:</b>	<b>Feb'22</b>	<b>YTD '22</b>	<b>PROGRAM:</b>	<b>Feb'22</b>	<b>YTD '22</b>	<b>PROGRAM:</b>	<b>Feb'22</b>	<b>YTD '22</b>
<b>RABIES CONTROL:</b>			Mercury Spills	0	0	<b>SMOKING:</b>		
Animal Bite Investigation	3	9	Orders to Appear before CCCHD	0	0	Administrative Review	0	0
Re-Inspections	0	0	BOH Orders Issued	0	0	Complaints	4	7
Consultations	0	2	Citations to Appear before BOH	0	0	Consultations	0	1
Sample or Specimen Pick-Up	3	5	Citations into Court	0	0	Fines	0	0
Sample or Specimen Delivery	1	2	<b>SCRAP TIRE ADDRESS:</b>			Investigations	4	6
Citations into Court	0	0	Consultations	0	1	Letters Sent - Notice of Report	4	7
<b>RADON:</b>			Enforcement	0	0	Letters Sent - Violation Warning	0	0
Consultations	5	13	Inspections	2	3	Letters Sent - Misc	0	1
<b>REAL ESTATE:</b>			<b>SEWAGE (143):</b>			<b>SOLID WASTE (142):</b>		
Consultations	0	0	Consultations	0	0	Hauler Registrations	0	8
Inspections - Well Only	3	4	Inspections:			Truck Registrations-w/Registration Fee	0	0
Inspections - Septic Only	5	6	Aerator Inspections	0	4	Truck Registrations-Additional Trucks	0	53
Inspections - Well & Septic	4	13	Dye Tests/Sampling	0	0	Truck Inspections	11	153
Re-Inspections	1	3	Finals (New/Repair)	7	12	Consultations	1	1
Sampling	17	39	1 Year Operation Inspections	0	0	Complaints Pending-Beg. Of Month	16	
Resampling	0	2	Site Approvals	2	3	Complaints Rec'd.-Current Month	9	15
<b>RECYCLING/TRANSFER STATION:</b>			Site Review Inspections	3	10	Complaints Investigated:		
Inspections	0	0	Subdivision Review Inspections	0	2	Valid Complaints	4	8
<b>ROUTINE WATER:</b>			Truck Inspections/Re-inspections	0	3	Notices of Violation Sent	2	4
Consultations	0	0	Licenses, Permits, Orders Issued:			Summary Compliance Abated	0	0
Sampling by CCCHD Staff	10	34	Site Review Applications	3	8	Non-Valid Abated	5	7
Sampling by Owner (Self)	16	20	Subdivision Review Applications	1	2	Complaint Re-Inspections	21	33
Inspections	0	0	Installation (New, Replace or Alter Permits)	2	7	Complaints Pending-End of Month	16	
Dye Tests	0	0	Operation Permits/Inspection Fees	15	35	Orders to Appear before CCCHD	0	0
<b>SALVAGE YARD:</b>			Site Approval Applications	2	3	BOH Orders Issued	0	0
Consultations	0	0	Sewage Installer Registrations	1	9	Citations to Appear before BOH	0	0
Enforcement	0	0	Service Provider Registrations	1	9	Citations into Court	0	0
Inspections	0	0	Septage Hauler Registrations/Trucks	3	9	<b>SWIMMING POOLS/SPAS (181):</b>		
<b>SCHOOL/PLAYGROUND (145):</b>			Variance Applications	0	1	Consultations	1	1
Consultations	0	0	Complaints Pending-Beg. Of Month	36		Licenses Issued	0	0
Inspections-Standard	10	10	Complaints Rec'd.-Current Month	1	3	Inspections-Standard	13	19
Re-Inspections	0	0	Complaints Investigated:			Notices of Critical Viol.-Standard Insp.	3	4
Complaints Pending-Beg. Of Month	0		Valid Complaints	1	3	Re-Inspections	4	4
Complaints Rec'd.-Current Month	0	0	Notices of Violation Sent	2	2	Complaints Pending-Beg. Of Month	0	
Complaints Investigated:			Summary Compliance Abated	0	0	Complaints Rec'd.-Current Month	0	0
Valid Complaints	0	0	Non-Valid Abated	0	0	Complaints Investigated:		
Notices of Violation Sent	0	0	Complaint Re-Inspections	0	2	Valid Complaints	0	0
Summary Compliance Abated	0	0	Complaints Pending-End of Month	36		Notices of Violation Sent	0	0
Non-Valid Abated	0	0	Orders to Appear before CCCHD	0	0	Summary Compliance Abated	0	0
Complaint Re-Inspections	0	0	BOH Orders Issued	0	0	Non-Valid Abated	0	0
Complaints Pending-End of Month	0		Citations to Appear before BOH	0	0	Complaint Re-Inspections	0	0
Outbreak Investigations	0	0	Citations into Court	0	0	Complaints Pending-End of Month	0	

PROGRAM:	Feb'22	YTD '22	PROGRAM:	Feb'22	YTD '22	PROGRAM:	Feb'22	YTD '22
<b>SWIMMING POOLS/SPAS (cont'd.):</b>			<b>WEST NILE VIRUS (198):</b>			<b>WEST NILE VIRUS (cont'd.):</b>		
Outbreak Investigations	0	0	Consultations	0	0	Orders to Appear before CCCHD	0	0
Orders to Appear before CCCHD	0	0	Complaints Pending-Beg. Of Month	0		BOH Orders Issued	0	0
BOH Orders Issued	0	0	Complaints Rec'd.-Current Month	0	0	Flyer/Information Distribution	0	0
<b>TOBACCO</b>	0	0	Complaints Investigated:			Treatments Applied	0	0
Licenses Issued	10	25	Valid Complaints	0	0	<b>MEETINGS/TRAINING:</b>		
<b>TATTOO/BODY PIERCING (171):</b>			Notices of Violation Sent	0	0	Meetings	27	48
Consultations	2	4	Summary Compliance Abated	0	0	Training-Given	0	0
Licenses Issued/*Temporary	0	17	Non-Valid Abated	0	0	Training-Received	69	110
Inspections-Standand/*Temporary	0	0	Complaint Re-Inspections	0	0			
Notices of Critical Viol.-Standard Insp.	0	0	Complaints Pending-End of Month	0				
Re-Inspections	0	0	<b>REPORTED ANIMAL BITES/ RABIES EXPOSURE:</b>	<b>Feb'22</b>			<b>Feb'21</b>	<b>Feb'21</b>
Complaints Pending-Beg. Of Month	0			<b>OWNED</b>	<b>UNOWNED</b>	<b>YTD 2022</b>	<b>OWNED</b>	<b>UNOWNED</b>
Complaints Rec'd.-Current Month	0	0	<b>DOG: Bite/Non-Bite/Other Events</b>	7	0	21	6	1
Complaints Investigated:			Total Persons Exposed	7		24	6	19
Valid Complaints	0	0	# People Rec. Post-Exposure	1		1	0	0
Notices of Violation Sent	0	0	# Vaccinated at Time of Incident	1		3	2	6
Summary Compliance Abated	0	0	# Sent to ODH-Negative	2		4	0	1
Non-Valid Abated	0	0	# Sent to ODH-Positive/*Unsat.	0		0	0	0
Complaint Re-Inspections	0	0	<b>CAT: Bite/Non-Bite/Other Events</b>	0		0	0	2
Complaints Pending-End of Month	0		Total Persons Exposed	0		0	0	2
Outbreak Investigations	0	0	# People Rec. Post-Exposure	0		0	0	0
Orders to Appear before CCCHD	0	0	# Vaccinated at Time of Incident	0		0	0	0
BOH Orders Issued	0	0	# Sent to ODH-Negative	0		0	0	1
Citations to Appear before BOH	0	0	# Sent to ODH-Positive/*Unsat.	0		0	0	0
Citations into Court (*Search Warr.)	0	0	<b>RACCOON:</b>					
<b>VECTOR-BORNE (TICKS):</b>			Bite/Non-Bite/Other Events		0	0		0
Consultations	0	0	Total Persons Exposed		0	0		0
# Ticks Received	0	0	# People Rec. Post-Exposure		0	0		0
# Ticks Identified	0	0	# Sent to ODH-Negative		0	0		0
# Ticks Sent to ODH	0	0	# Sent to ODH-Positive/*Unsat.		0	0		0
# Ticks Ident. by ODH/Pending	0	0	<b>BAT: Bite/Non-Bite/Other Events</b>		1	2		1
<b>WELLS (PWS):</b>			Total Persons Exposed		0	1		2
Consultations	0	0	# People Rec. Post-Exposure		1	1		0
Licenses/Permits/Orders Issued:			# Sent to ODH-Negative		0	1		1
Alterations	1	2	# Sent to ODH-Positive/*Unsat.		0	0		0
New	3	9	<b>OTHER:</b>					0
Sealing Permits	1	2	Bite/Non-Bite/Other Events		0	0		0
Inspections	6	10	Total Persons Exposed		0	0		0
PWS Contractor Inspections	0	0	# People Rec. Post-Exposure		0	0		0
Re-Inspections	0	0	# Sent to ODH-Negative		0	0		0
New Well Sampling	6	10	# Sent to ODH-Positive/*Unsat.		0	0		0
Dye Tests	0	0	<b>Cases Pending:</b>	<b>Dogs:</b>	4	<b>Cats:</b>	0	



**Clark County Combined Health District  
Early Childhood Division  
February 2022**

**Referrals**

Type of Referral	Current	FYTD
<b>Help Me Grow-Home Visiting</b> FY: July 1, 2021 - June 30, 2022	5	49
<b>Federal Home Visiting (MIECHV)</b> FY: October 1, 2021 - September 30, 2022	12	48
<b>Moms &amp; Babies First</b> FY: October 1, 2021 - September 30, 2022	6	20
<b>Total Referrals For February</b>	<b>23</b>	<b>117</b>

Referral Sources	Current
Health District	2
Primary Caregiver	3
WIC	11
Other	7
<b>Total</b>	<b>23</b>

**Families Served in Home Visiting**

Program	Total Served	Target	%
Help Me Grow	81	91	89%
Federal (MIECHV)	116	132	88%
Moms & Babies First	26	30	87%

Home Visits	Current	FYTD
HMG-HV	133	1242
MIECHV	198	1018
MBF	14	84
<b>Total</b>	<b>345</b>	<b>2344</b>

**Safe Sleep Initiative:**

Activity	Served
Cribs For Kids	31

**Moms Quit For Two:**

Activity	Enrolled
Baby & Me Tobacco Free	14

**Division Programs:**

**Help Me Grow-Ohio Healthy Families:** prenatal to age 3

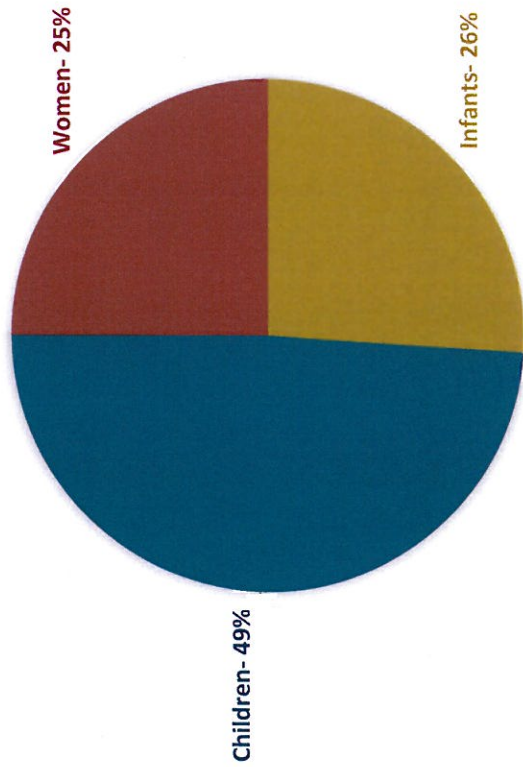
**Moms & Babies First:** funded by Ohio's Black Infant Vitality Program: prenatal to age 1

**Cribs For Kids:** prenatal (last trimester) up to 1 year

**Moms Quit For Two** grant funds Baby & Me Tobacco Free: mom enrolls prenatally and can be served up to 1 year after birth of baby

Initial Participation Report  
Reporting Month- FEB 2022

Agency Distribution of Women, Infants  
and Children



CLARK COUNTY WIC PROGRAM

March Is National Nutrition Month



**Distribution & Caseload of Women, Infant, and Children  
Active in CCCHD WIC Program**

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Average
Women													
Total	709	691	686	687	707								703
Pregnant	302	218	209	210	210								209
Exclusive BF	81	71	63	62	60								70
Partially BF	147	116	113	113	121								113
Non-BF	179	286	301	302	316								310
Infant													
Total	806	732	724	726	733								694
Exclusive BF	99	66	57	59	53								61
Partially BF	43	25	22	23	22								22
Non-BF	664	641	645	644	658								610
Children													
Total	1,241	1,449	1,464	1,432	1,409								1,469
WIC Total Caseload	2,756	2,872	2,874	2,845	2,849								2,866

\*Corrected initial caseload numbers in red.

Breastfeeding Initiation

Fiscal Year	Clark - Average	State - Average
16	46.1%	58.2%
17	47.7%	59.2%
18	52.1%	60.6%
19	52.1%	61.3%
20	50.9%	60.0%
21	53.7%	54.7%
22	60.7%	52.4%

(December 2021 - 61.2%)

ASSIGNED FY22 Caseload	% Total Caseload Difference
2,808	2.07%

**OHIO WIC ADMINISTRATIVE REQUIREMENTS****115. Management Evaluations**

The Ohio WIC program conducts management evaluations to monitor and evaluate the local WIC project's provision of services. Each local project is evaluated biennially by State WIC staff according to the standards outlined in the WIC Onsite Review Guide.

**115.1 Purpose and Expectation**

The purpose of the WIC Management Evaluation is to ensure that federal and state regulations and policies are followed and to improve WIC services by identifying program strengths and weaknesses in relation to established standards. In addition, the management evaluation serves to correct identified weaknesses through the implementation of a locally developed and State agency approved corrective action plan that includes time frames and responsible parties. Management evaluations are also used to make recommendations for more effective program functioning and to identify needed changes in State operations (i.e., policy and procedures). The evaluation process may reveal ideas to share with other local projects.

Serving as a communication, information, and compliance tool, the management evaluation can be used to demonstrate progress local projects have made and provide State staff with another method of updating and training local project staff.

During the evaluation, local project staff will be expected to meet and discuss requirements with State staff, as well as demonstrate compliance with requirements through use of appropriate reports, files, and actual observance of clinic operations. Specific details of the site visit are jointly agreed upon, documented in the pre-visit letter, and discussed at the entrance conference.

**115.2 Areas Reviewed During Management Evaluations**

The biennial evaluations include all aspects of the local project's operations that correspond to the WIC Onsite Review Guide. Evaluations generally cover a three day period, except in cases of larger projects where the time period may be extended. A minimum of 20% of the project's clinics, both full-time and part-time, must be reviewed or at least one clinic, whichever is greater. This 20% may or may not include subcontractor sites. Local project directors and State WIC consultants may decide to review more clinics than the 20% minimum, depending on the local project's needs.

**OHIO WIC ADMINISTRATIVE REQUIREMENTS**

The management evaluation (ME) consists of an entrance conference, actual review of clinic procedures, and an exit conference where the results of the review are communicated to the local WIC agency staff. A copy of the completed WIC Onsite Review Guide is provided to the local WIC director via email attachment within 45 days of the exit conference. The following outlines the areas that are reviewed during the ME.

- **General Administration:** Requirements in this portion of the evaluation cover State correspondence, the WIC grant application, record retention procedures, caseload management, outreach and referral mechanisms, staffing and clinic operations, civil rights compliance, and employee fraud, fair hearing and participant abuse procedures and documentation.
- **Financial Management:** Requirements in this portion of the evaluation cover all fiscal procedures, reports, documentation, and inventories.
- **System Administration:** Requirements in this portion of the evaluation cover all WIC system operations, reports, and electronic handling of food benefits.
- **Certification:** Requirements in this portion of the evaluation cover all procedures and policies that relate to certifying an applicant for the WIC program including voter registration procedures.
- **Nutrition Education:** Requirements in this portion of the evaluation cover all standards and procedures for nutrition and breastfeeding education and policies governing high-risk participants.
- **Food Issuance:** Requirements in this portion of the evaluation cover the issuance of special formulas, food package assignment, managing returned and donated formula, and handling of food benefits.
- **Breastfeeding:** Requirements in this portion of the evaluation cover all standards and procedures for promoting breastfeeding, supporting participants and their families, training, pump issuance, as well as the Breastfeeding Peer Helper Program.

**OHIO WIC ADMINISTRATIVE REQUIREMENTS****115.3 Follow-up to the Management Evaluation**

- Management Evaluation Letter

The State WIC office will issue a written letter to the local project containing the corrective actions and recommendations cited in the WIC Onsite Review Guide within 45 days of the end of the review.

- Management Evaluation Response

The local project is required to provide a written response to all corrective actions and recommendations contained in the WIC Onsite Review Guide within 45 days of receipt. Corrective actions require that an action be taken to resolve any issues; Recommendations require a response but are optional for the project to incorporate into its clinic environment. Responses to corrective actions should be specific, measurable, and time- and action-oriented. The local project must use the 'Project Response' portion of the WIC Onsite Review Guide to respond to all corrective actions and recommendations.

- Approval Letter

An approval letter stating acceptance of the local agency's response to the Management Evaluation Letter will be sent by the State WIC office within 15 days of receipt. If the local agency's response letter is satisfactory, the management evaluation process is considered complete.

Should the State WIC office disapprove any corrective actions taken or time frames implemented, State staff will contact the project and discuss needed changes. A letter will be sent to the local agency recording these concerns. The local agency will again be required to submit a written response to these concerns within 15 days. Upon State WIC approval of the resubmitted action plan, an approval letter will be issued and the management evaluation process will be considered complete.



## Abbott Voluntarily Recalls Powder Formulas Manufactured at One Plant

- Recall is isolated to powder formulas, including Similac®, Alimentum® and EleCare®, manufactured at the Sturgis, Mich., plant
- Recall does not include any metabolic deficiency nutrition formulas
- No Abbott liquid formulas or other Abbott nutrition powders and brands are impacted
- Parents or customers with impacted product should visit [similacrecall.com](http://similacrecall.com) or call +1-800-986-8540

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ABBOTT PARK, Ill., Feb. 17, 2022 – Abbott is initiating a proactive, voluntary recall of powder formulas, including Similac, Alimentum and EleCare manufactured in Sturgis, Mich., one of the company's manufacturing facilities. The recall does not include any metabolic deficiency nutrition formulas.

Abbott is voluntarily recalling these products after four consumer complaints related to *Cronobacter sakazakii* or *Salmonella* Newport in infants who had consumed powder infant formula manufactured in this facility.

Additionally, as part of Abbott's quality processes, we conduct routine testing for *Cronobacter sakazakii* and other pathogens in our manufacturing facilities. During testing in our Sturgis, Mich., facility, we found evidence of *Cronobacter sakazakii* in the plant in non-product contact areas. We found no evidence of *Salmonella* Newport. This investigation is ongoing.

Importantly, no distributed product has tested positive for the presence of either of these bacteria, and we continue to test. Abbott conducts extensive quality checks on each completed batch of infant formula, including microbiological analysis prior to release. All finished products are tested for *Cronobacter sakazakii*, *Salmonella* Newport and other pathogens and they must test negative before any product is released. Additionally, retained samples related to the three complaints for *Cronobacter sakazakii* tested negative for *Cronobacter sakazakii*. And the retained sample related to the complaint for *Salmonella* Newport tested negative for *Salmonella* Newport.

While Abbott's testing of finished product detected no pathogens, we are taking action by recalling the powder formula manufactured in this facility with an expiration of April 1, 2022, or later. No Abbott liquid formulas, powder formulas, or nutrition products from other facilities are impacted by the recall.

*Cronobacter sakazakii* is commonly found in the environment and a variety of areas in the home. It can cause fever, poor feeding, excessive crying or low energy as well as other serious symptoms. It's important to follow the instructions for proper preparation, handling and storage of powder formulas.

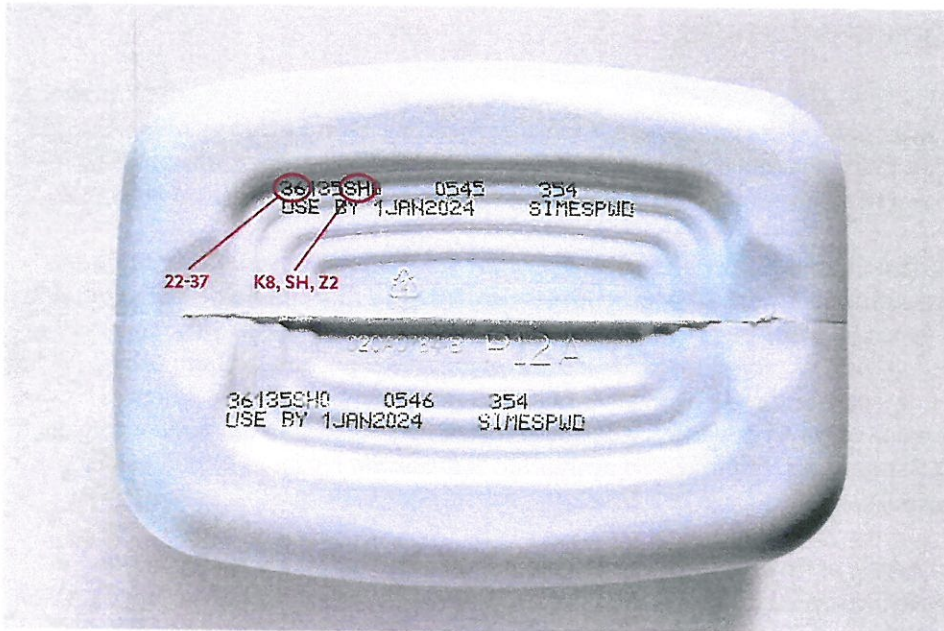
"We know parents depend on us to provide them with the highest quality nutrition formulas," said Joe Manning, executive vice president, nutritional products, Abbott. "We're taking this action so parents know they can trust us to meet our high standards, as well as theirs. We deeply regret the concern and inconvenience this situation will cause parents, caregivers and health care professionals."

### What Parents and Caregivers Should Do

The products under recall have a multidigit number on the bottom of the container starting with the first two digits 22 through 37, contains K8, SH, or Z2 and with an expiration date of April 1, 2022, or after.

To find out if the product you have is included in this recall, visit [similacrecall.com](http://similacrecall.com) and type in the code on the bottom of the package, or call +1-800-986-8540 (U.S.) and follow the instructions provided. No action is needed for previously consumed product. If you have questions about feeding your child, contact your healthcare professional.

Some product was distributed to countries outside the U.S. A list of these products can be found at [similacrecall.com](http://similacrecall.com).



### About Abbott

Abbott is a global healthcare leader that helps people live more fully at all stages of life. Our portfolio of life-changing technologies spans the spectrum of healthcare, with leading businesses and products in diagnostics, medical devices, nutritionals and branded generic medicines. Our 113,000 colleagues serve people in more than 160 countries.

Connect with us at [www.abbott.com](http://www.abbott.com), on LinkedIn at [www.linkedin.com/company/abbott-/](http://www.linkedin.com/company/abbott-/), on Facebook at [www.facebook.com/Abbott](http://www.facebook.com/Abbott) and on Twitter @AbbottNews.



## Health Planning Team: March 2022 Update

### **Drug Overdose Prevention Program**

#### One2One Update:

- **Second Harvest Food Bank (SHFB) Partnership:** Over the month of February, we gave out 23 food boxes to our clients.
- **Interfaith Hospitality Network (IHN) Partnership:** Over the month of February, we completed 4 housing referrals.
- **Department of Job and Family Services- Clark County (DJFS-CCO Partnership:** Over the month of February, we assisted 5 clients in completing applications for Medicaid and SNAP benefits.
- **Exchange Stats**, both locations, from January 2021 (February 2022 Stats were not available at the time of this report):
  - 139 Client visits
  - 6,908 Syringes exchanged
  - 78 Narcan kits distributed
  - 6 Treatment referrals
  - 6 Hepatitis C Screens
  - 10 HIV Screens
  - 15 Syphilis Screens
- **Expanded hours:** McKinley Hall, our main partner on One2One, recently received a small grant from the Ohio Department of Health to expand the syringe exchange program hours. This is to serve clients that may have barriers of attending the program during work hours. McKinley Hall will provide \$30,000 to CCCHD to help supplement nurse staffing and health testing supplies associated with the program.
  - The new hours began on March 7<sup>th</sup> and are as follows:
    - Mondays, 5- 8pm @ CCCHD's Southern Village Clinic (New Day)
    - Thursday, 3 – 7pm @ Southern Village Clinic (extended by an hour)
    - Wednesdays will stay the same: 1-4pm @ Springfield Soup Kitchen

#### Substance Abuse/DOP:

- We are in the process of developing the annual awareness campaign. We reviewed the overdose data from the Drug Death Review committee, and it was noted that there was a significant rise in overdoses from individuals who are using pills. Individuals believe that they are receiving prescription benzo-class pills, but those pills are being pressed with a much deadlier substance such as fentanyl or clonazepam. This is a trend that we have also seen across the state. As a result, we have decided to use the DEA's One Pill Can Kill campaign messaging in Clark County. The campaign will consist of Facebook Ads, brochures, and posters to spread awareness of what these pills are being laced with.
  - The campaign will launch at the beginning of April and Facebook analytics will be reviewed to evaluate the campaign.
  - Additional information and visuals will be provided when available.

## Health Planning Team: March 2022 Update

### **Maternal Child Health Program (MP)**

#### Objective 2: Preconception Health/ Start Strong

- One goal of Start Strong Clark County is to decrease the percentage of women **smoking** at some point in their pregnancies from 19.4% to 13.2% (or < 200) by December 31, 2022. The following is a summary of work that has been done recently to accomplish the goal:
  - Mercy REACH enrollment: zero for 2022. Baby and Me Tobacco Free (BMTF) enrollment: Since the program began in mid-2015, BMTF has served approximately 50 women each year with the numbers being lower during the pandemic. BMTF served 40 last year and 20 this year so far. Of those, 85 % received Medicaid, 70% were white and 28% African American. Of births recorded, 90% of babies born had a healthy birth weight.
  - Regularly scheduled meetings are happening between Mercy REACH and Baby and Me Tobacco free to identify opportunities to continue to increase program enrollment.
  - Clinical Community Collaborative Meeting Quarterly: Discussed opportunities to increase enrollment at FEB 2022 meeting. Identified the benefit/ need for a community health worker/ navigator positioned on-site as a solution.
- Another goal of Start Strong Clark County (SSCC) is to create or find an existing assessment tool for social support among pregnant women to decrease chronic stress and improve birth outcomes. A Social Determinants of Health (SDOH) subcommittee has been developed with representation from county prenatal care providers (Rocking Horse Center, Mercy Health, Physicians and Surgeons for Women, Kettering) and identified a screening tool (food, shelter, utilities, safety, transportation) and three practices have implemented standardized screening for SDOH of woman encountering prenatal care. We are continuing to explore ways to connect clients to the resources and ways to ensure loop closure (the client was connected to the resource). Continued identification of the benefit/ need for a community health worker/ navigator positioned on-site as a solution.
  - SSCC (AnnMarie Schmersal) and Rocking Horse Center (Amanda Ambrosio) involvement in state of Ohio project developing a statewide shared resource referral platform.

#### Objective 4: Adolescent Health

- We continue to plan for our two main projects this year. Those projects are Cooking Matters and Life Sports. We excited to build upon the progress that was made last year.
  - Life Sports is tentatively scheduled for July and will be held at Hayward Middle School
  - Cooking Matters is scheduled on Thursdays from 6-7pm, May 6<sup>th</sup> to June 9<sup>th</sup>. We will be working with local partners to recruit interested families

## Health Planning Team: March 2022 Update

### Safe Communities:

- Lifesavers National Conference March 13-16<sup>th</sup> in Chicago.
- St. Patrick's Day table tents to be distributed to 11 bars across Clark County with Drive Sober Get Pulled Over messaging. Messaging will also be shared on social media.



- Coalition meeting was held, and countermeasures were discussed with an emphasis on impaired driving (drug-impaired) and seatbelt usage.
  - Ohio State Highway Patrol is offering “Live to Drive” presentations to local high schools to talk about traffic safety
  - ThinkFast was held at Northeastern on March 10<sup>th</sup>.
- Plan to attend a safety meeting in Champaign County to speak to law enforcement and school officials about traffic safety programming (specifically ThinkFast) on April 5<sup>th</sup>.

### Tobacco:

- Created postcards with important Tobacco Retailer License information. Postcard included QR code linking an educational video for retailers on Tobacco Retail License policy and application procedure. Postcard is used to educate retailers and encourage application compliance. Nearly 100% of retailers in Springfield are fully compliant and licensed as of March 10, 2022.
- Advocated for regulatory policy on tobacco vaping flavors at the event “Coffee with Legislators” Met with lawmakers, Sen. Bob Hackett and Rep. Kyle Koehler at the Chamber of Commerce. Provided both congressman a FAQ Sheet highlighting tobacco statistics and youth in Clark County, backing need for more support for intervention at the state level. Ohio currently does not have any regulations on vaping flavors. Flavors are the driving motivator for youth participating in tobacco vape use.
- Banner Pledge Project for Northwestern HS promoting anti-vaping education with student led peer to peer education. Peer group will also recruit student body to sign banner pledging to resist tobacco use. Tobacco education and Big Tobacco Industry intentionally targeting youth through strategic marketing to create lifelong smokers will be presented during presentation. Evaluations will be collected through distributed student survey collecting information on My Life My Quit cessation resource readiness.

## Health Planning Team: March 2022 Update

### **Creating Healthy Communities:**

- Provided feedback on the Clark County Transportation Coordinating Council Forward 2030 plan on behalf of CCCHD.
- Attended community listening sessions to gain feedback from residents for Community Health Foundations HEAL (Health Eating, Active Living) initiative.
- The contract for the Visioning Garden Coordinator has been approved by CCCHD as well as Promise Neighborhood. Promise will be hiring a community member to fill that position soon.



### **Lead-Safe Homes:**

- Completed two educational presentations:
  - Neighborhood Housing Partnership of Greater Springfield – developed and executed 1<sup>st</sup> monthly presentation to potential homebuyers; 10 attendees representing 7 households; follow-up survey sent – two responses received
  - Clark County Combined Health District (CCCHD) Lead Safety Awareness In-Service – lead initiative team and lead case manager developed and executed 1<sup>st</sup> of two scheduled in-services for nursing division and secretarial staff – 12 attendees from Reproductive Health, Immunizations, School Screenings, and Bereavement. Pre and post-test completed to assess knowledge and effectiveness of training. Post-training evaluation revealed 100% of present staff were able to identify lead as a health hazard to children, the most common sources of lead exposure, and requirements for lead testing.
  - Two upcoming training sessions for Start Strong Coalition and CCCHD Early Childhood department concerning lead and its effects during pregnancy and early development
- Advanced strategic partnership with the City of Springfield and a local nonprofit foundation beginning development of a lead abatement pilot program to remediate some of Springfield's ODH lead placarded properties.
- Investigating and identifying existing lead safe education/promotion materials to use and or adapt for various target groups (new and expectant parents, healthcare providers, homeowners, landlords, tenants, contractors, community partners and general community awareness)

Prevent. Promote. Protect.

# COVID-19 Vaccination Pilot Project

Presented on 3/9/2022 on ODH/LHD statewide call




1

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## Current Purpose of Vaccination

- 🛡️ Prevent severe illness
- 🛡️ Prevent hospitalization
- 🛡️ Prevent death
- 🛡️ Protect immunocompromised
- 🛡️ Protect those who cannot get vaccinated
- 🛡️ Limit infections, spread
- 🛡️ Reduce potential for new variants



2

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## Short Term Goals

- 🛡️ Explore better data tools
- 🛡️ Capitalize on all vaccine providers' reach
- 🛡️ Target census tracts meeting local criteria
  - High case & hospitalization rates
  - Low primary series & booster rates
  - Food pantries, high risk schools
- 🛡️ Share data/need, progress with community partners

Clark County  
Combined  
Health District

3

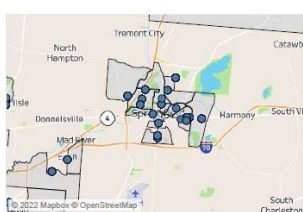
Data First Tool
Provider Summary
County Profile
Community Resources

### State of Ohio | Provider Summary

The map below will show all providers who administered vaccines to residents of selected census tracts. Dose Type: All

Select a barbars below in the provider summary to filter the graph below.


**Target Census Tracts**  
All



Show only top N providers  
100

Facility ID	Provider Name	Provider Address	Provider County	Provider Census Tract	Total Vaccinations
7299	CLARK CO COMBINED HEALTH DISTRICT	529 E HOME RD. SPRINGFIELD OH 45503	CLARK	39023001700	595
15976	WALGREEN #6521	2809 E MAIN ST SPRINGFIELD OH 45503	CLARK	39023001400	137
16349	CVS STORE #06186	2565 EAST MAIN STREET SPRINGFIELD OH 45503	CLARK	39023001400	127
16021	WALGREEN #7884	1140 N LIMESTONE ST SPRINGFIELD OH 45503	CLARK	39023000600	99
22877	MEIJER PHARMACY #066-SPRINGFIELD	1500 HILLCREST AVE SPRINGFIELD OH 45504	CLARK	39023001900	94
15491	RITE AID #02303	101 WEST MAIN STREET ENON OH 45323	CLARK	39023003102	92
15278	WALMART #2429	2100 N BECHTLE AVE SPRINGFIELD OH 45504	CLARK	39023001900	82
16183	CVS STORE #03468	1475 UPPER VALLEY PIKE SPRINGFIELD OH 45504	CLARK	39023002502	74
15201	KROGER PHARMACY - BECHTLE 832	995 NORTH BECHTLE ROAD SPRINGFIELD OH 4...	CLARK	39023001900	67
15472	RITE AID #01187	564 MACADAMS DRIVE NEW CARLISLE OH 45344	CLARK	39023002901	61
15557	RITE AID #02629	120 SOUTH MAIN STREET	CLARK	39023002702	60

**Vaccination Date**  
1/16/2022 to 2/8/2022 and Null values



**Booster Dose**  
90.49%  
1,235

**Completed Dose**  
20.35%  
719

**Starting Dose**  
18.81%  
460

Total Vaccinations: 2,446

4

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## Who is Vaccinating Clark Residents?

- 🛡️ Vaccination Data Tool 1/18-2/8/2022
- 🛡️ 2,446 COVID-19 vaccines administered
  - **69%** by pharmacy system
  - **24%** by CCCHD
  - **<1%** by FQHC
  - **7%** by other providers

Clark County  
Combined  
Health District

5

Prevent. Promote. Protect.

## Who is Vaccinating Clark Residents?

- 🛡️ Vaccination Data Tool 1/18-2/8/2022
- 🛡️ 2,446 COVID-19 vaccines administered
  - **50.5%** booster doses
  - **29.4%** primary series completion doses
  - **18.8%** primary series start doses

Clark County  
Combined  
Health District

6

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## Who is Vaccinating Clark Residents?

- 🛡️ Vaccination Data Tool 1/18-2/8/2022
- 🛡️ CCCHD remains single largest provider
- 🛡️ Looking at **all** providers, 7 out of 10 residents are getting vaccine from the pharmacy system right now

Clark County  
Combined  
Health District

7

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## Who is Vaccinating Clark Residents?

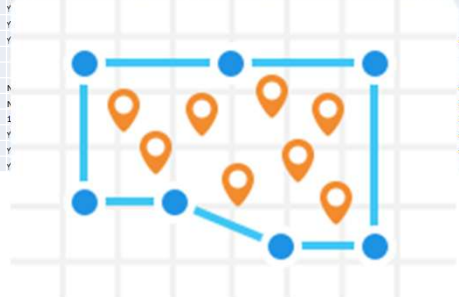
- 🛡️ Capitalize on pharmacy impact/reach
- 🛡️ Data collection
  - Timeline
  - Hours
  - Appointments/walk-in
  - Registration
  - Insurance
  - **Market/refer**
  - Incentives
  - Ages (including <5)
  - Manufacturers

Clark County  
Combined  
Health District

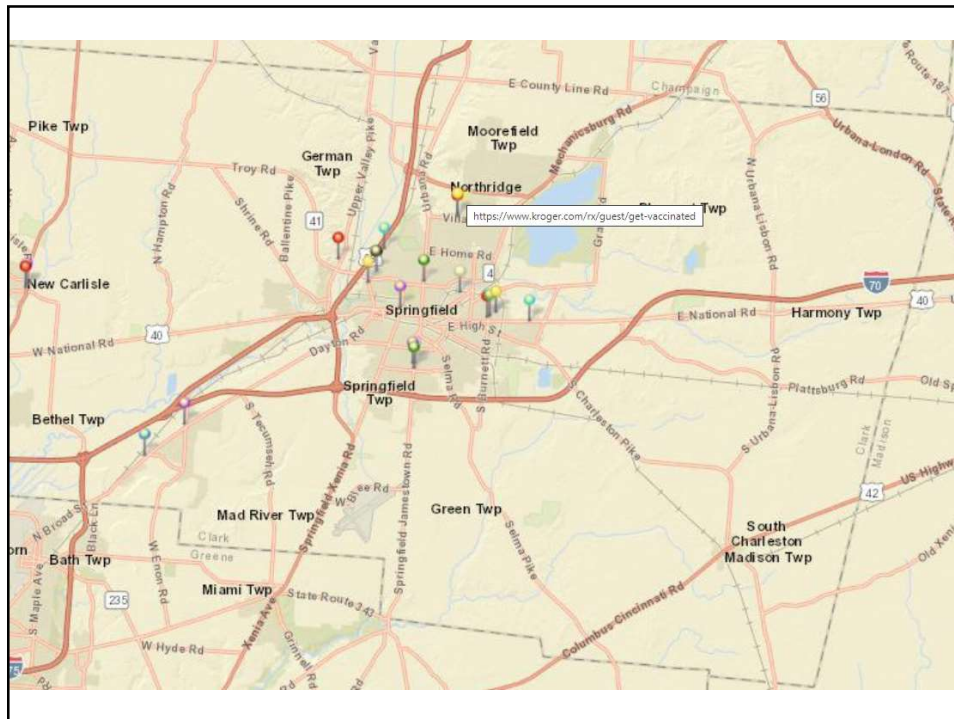
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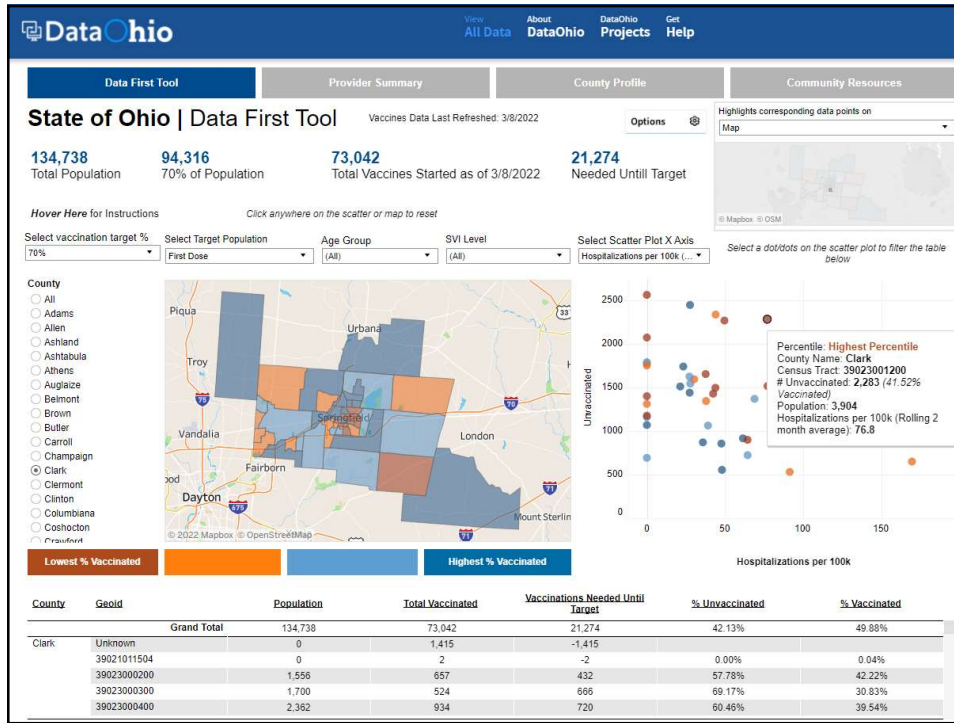
WHAT ARE YOUR CURRENT HOURS FOR VACCINATION	ARE YOUR HOURS FOR C VACCINE LIMITED OR DO THEY MIRROR THE HOURS THAT YOU ARE OPEN	HOW DO PEOPLE SIGN UP	CAN A PERSON WALK IN FOR C VACCINE	CAN A PERSON CALL TO SIGN UP	IF SOMEONE HAS NO INSURANCE DO YOU STILL VACCINATE WITHOUT A COST	WHAT ADDITIONAL CAPACITY DO YOU HAVE	CAN THE HEALTH DISTRICT MORE ACTIVELY MARKET YOUR LOCATION
9A-9P	LIMITED	ONLINE/PHONE	NO	YES	NO CHARGE	HAS SLOWED	ADEQUATE
10A-8P	LIMITED	ONLINE	NO	NO	NO CHARGE	NEED HELP	YES
9A-7P	MIRROR	ONLINE/CALL CORPORATE	NO	YES	NO CHARGE	NONE	UNSURE BUSY W/VACCINES
9A-9P	LIMITED	ONLINE/CALL CORPORATE	NO	CORPORATE	NO CHARGE	NEED SET VACCINATOR	YES
11A-7P	LIMITED	ONLINE/CALL	YES	YES	YES	YES	YES
8A-8P M-F		ONLINE	YES	NO	YES	YES SLOWED	YES
8A-7P	MIRROR	ONLINE/CALL	NO	YES	YES	YES	YES
8A-7:30P	MIRROR	BOTH	YES	YES	YES	YES	YES
9A-8P	MIRROR	TEXT/ONLINE/CALL	NO	YES	YES	YES	YES
10-7 APPT ONLY	9-8 M-F, 9-6 SAT	WEBSITE	YES 7-11	NO	WFC	LINK	CONTACT W/ TO MYEN
1000-1900 APPT, 2-3 WALKINS	LIMITED	WEBSITE	+				
10-7 APPT, 2-3 WALKIN	9-8 NORMALLY	WEBSITE	+				
9A-7P, 2-3 WALKIN	MOSTLY	WEBSITE	+				
8A-8P APPT ONLY							
9A-9P		WEBSITE, CALL 1-800#					
0930-1700 COVID VACCINE	9A-7P M-F, 9A-6P SAT, 10A-6P SUN	WEBSITE	+				
9A-7P		WEBSITE	+				
SAT 9A-6P	9A-6P WEEKDAYS	WALKIN OR WEBSITE	+				
9A-6P	9A-7PM SAT, 10-6 SUN	SCHED WEBSITE	+				
10A-4P M-F, NOT SAT	9A-6P M-F, 9-4 SAT		+				
SAME AS LAGONDA LOCATION	10-4 M-F WALKIN	WALKIN	+				



9



10



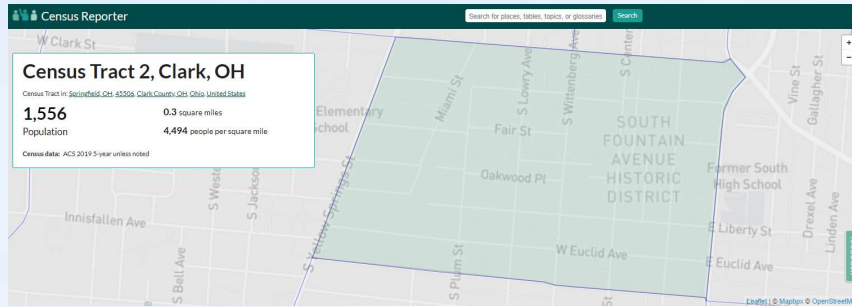
11

Geoid	% Vaccines Started	Cases Per 100K	Hospitalizations Per 100k	Un-Vax %	Unvaccinated	SVI Level	Health Opp Index	SVI Score	Census tract
39023000200	44.07%	8120.173008	277.6127524	55.93%	805.856	High	6.26	0.91	2
39023001000	57.65%	11655.59734	209.3819881	42.35%	606.788	Mod-High	6.6	0.64	
39023002501	75.30%	10333.27021	197.7659371	24.70%	499.593	Mod-High	9.45	0.6	
39023001200	43.27%	9914.512456	162.9782869	56.73%	2088.472	High	2.38	0.99	12
39023000600	40.08%	10724.46589	161.2701638	59.92%	1486.31	Mod-High	5.12	0.69	
39023001400	46.82%	9177.758237	160.0771785	53.18%	1993.192	High	7.61	0.81	14
39023001300	58.48%	11105.67902	148.869692	41.52%	1394.642	High	7.33	0.92	
39023002403	68.96%	10869.15508	140.7921643	31.04%	1102.334	Mod-Low	8.74	0.42	
39023002601									11
39023001700									11
39023003400									8
39023000400									5
39023002606									15
39023003102									78
39023003301									5
39023003700									38
39023001500									36
39023001900									12
39023000902									9
39023002000									5
39023002404									5
39023003302	43.62%	7786.453853	81.5335482	56.38%	1382.978	Mod-High	9.15	0.71	
39023003200	59.67%	7003.011295	80.0344148	40.33%	1007.925	Low	9.5	0.04	
39023002701	55.64%	8031.223653	72.68075704	44.36%	1220.76	High	7.71	0.95	
39023002200	61.52%	7868.529224	72.63257745	38.48%	1589.378	Low	9.51	0.06	
39023002301	47.16%	7752.825041	67.71026237	52.84%	1560.762	Low	9.55	0.19	
390230013002	58.99%	7900.24015	57.6659865	41.01%	1422.249	Low	9.55	0.18	
39023001600	58.40%	10077.2311	57.25699487	41.60%	1453.023	Mod-High	8.41	0.57	
39023002602	62.92%	9649.919203	57.10011363	37.08%	1298.62	Low	9.63	0.17	
39023002100	52.69%	6726.532809	56.05444007	47.31%	843.98	Mod-High	6.63	0.63	

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Prevent. Promote. Protect.

## Census Tract 2



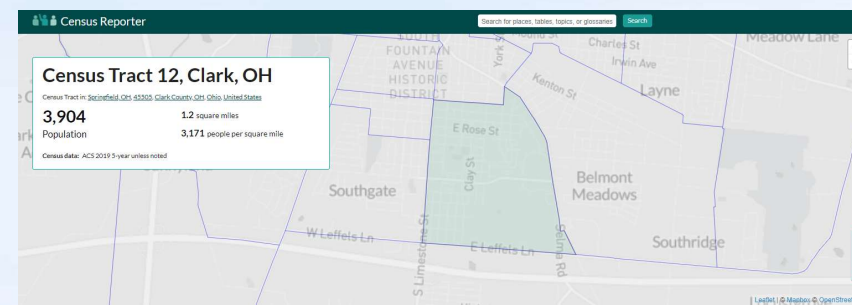
- 📍 FQHC located in this census tract
- 📍 Share data & opportunity, framework for ground game
- 📍 Outreach
- 📍 Community vax event planned for 4/1/2022

*Clark County  
Combined  
Health District*

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## Census Tract 12



- 📍 CCCHD Southern Village office located here
- 📍 Opened weekly vaccine clinic
- 📍 Incentives (CCCHD and MCOs)
- 📍 56 vaccines administered as of 3/7/2022
  - 34% first doses

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Health District*

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Prevent. Promote. Protect.

## Census Tract 12

- 📍 Groceryland opened December 2021 (food desert)
- 📍 Opened weekly vaccine clinic
  - Gateway to future services/partnership
- 📍 8 vaccines administered as of 3/7/2022
  - 0% first doses

**Clark County  
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## Census Tract 14

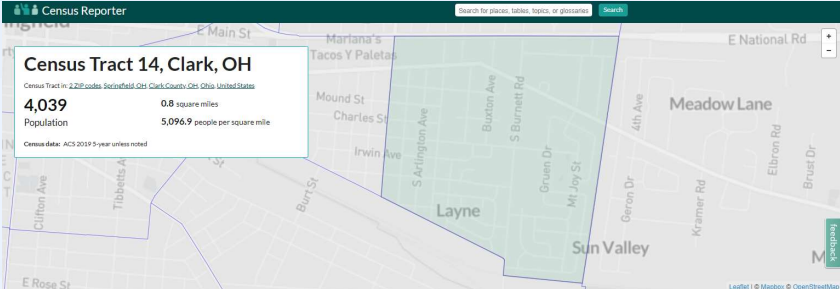
- 📍 WIC, Early Childhood, Help Me Grow located here
- 📍 CCHCD COVID-19 testing center located here

**Clark County  
Combined  
Health District**

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## Census Tract 14



**Census Tract 14, Clark, OH**  
 Census Tract in 2020  
**4,039** Population  
 0.8 square miles  
 5,096.9 people per square mile  
 Census date: ACS 2019 5-year unless noted

- 🛡️ Capitalize on WIC, EC, HMG “brand” and trust
- 🛡️ Opened weekly vaccine clinic
- 🛡️ Walk-in and drive-through options
- 🛡️ Incentives (CCCHD and MCOs)
- 🛡️ 30 doses administered as of 3/7/2022
  - 57% first doses

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Health District*

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## Additional Targets

- 🛡️ Food pantries (4)
  - Gift card incentives
- 🛡️ High risk schools (2)
  - Adjacent to census tract 12
  - Open to the entire community
- 🛡️ Booster eligibility calls
  - Data from ImpactSIIS

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Health District*

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## Goals

- 🛡️ 50 doses in each new clinic location over 4-week period
- 🛡️ Census tract vaccination rates (%) match county-wide rates (baseline)
  - Primary series start 60%
  - Boosters (eligible) 49%

Clark County  
 Combined  
 Health District

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## Vaccination Pilot Project

- 🛡️ Weekly meetings
  - Measure impacts, uptake
  - Examine timeframes for better ROI
  - Vaccine demand profile (1/2/3/4 dose)
  - Monitor pharmacy outreach
- 🛡️ Share data with community partners
  - Use local influence



03/04/2022

REVENUE AND EXPENDITURE REPORT FOR CLARK COUNTY  
 PERIOD ENDING 02/28/2022

\*NOTE: Available Balance / Pct Budget Used does not reflect amounts encumbered.

GL NUMBER	DESCRIPTION	2022 AMENDED BUDGET	YTD BALANCE 02/28/2022	ACTIVITY FOR MONTH 02/28/2022	% BDGT USED
Fund 8201 - HEALTH DISTRICT					
Revenues					
Dept 810 - CCCHD					
8201-810-411100	TAXES - REAL ESTATE	1,976,000.00	0.00	0.00	0%
8201-810-411300	TAXES - MANUFACTURED HOMES	3,200.00	0.00	0.00	0%
8201-810-421000	INTERGOVERNMENTAL	80,000.00	29,000.00	0.00	36%
8201-810-422110	INTERGOVERNMENTAL - H/R	278,000.00	0.00	0.00	0%
8201-810-431000	CHARGES FOR SERVICES	513,644.00	54,422.23	36,922.28	11%
8201-810-481000	OTHER REVENUE	487,000.00	159,843.77	42,546.00	33%
8201-810-520000	ADVANCES IN	30,000.00	0.00	0.00	0%
Total Dept 810 - CCCHD		3,367,844.00	247,766.00	81,455.78	7%
TOTAL REVENUES		3,367,844.00	247,766.00	81,455.78	7%
Expenditures					
Dept 810 - CCCHD					
8201-810-702000	SALARIES - EMPLOYEES	1,619,187.00	265,020.84	124,087.53	16%
8201-810-711000	PERS	226,686.00	38,557.50	17,915.40	17%
8201-810-712000	WORKERS COMPENSATION	32,384.00	0.00	0.00	0%
8201-810-714000	MEDICARE	23,478.00	3,701.96	1,726.89	16%
8201-810-715000	DENTAL INSURANCE	5,100.00	803.38	382.54	16%
8201-810-716000	LIFE INSURANCE	1,190.00	175.15	83.61	15%
8201-810-717000	HEALTH INSURANCE	400,000.00	72,174.44	34,073.71	18%
8201-810-718100	TRAINING & DEVELOPMENT	10,000.00	0.00	0.00	0%
8201-810-718400	TRAVEL	13,517.50	403.64	275.14	3%
8201-810-721000	OFFICE SUPPLIES	333,536.44	21,766.90	14,823.09	7%
8201-810-732000	ADVERTISING & PRINTING	2,000.00	0.00	0.00	0%
8201-810-740000	CONTRACT SERVICES - REPAIRS	5,000.00	0.00	0.00	0%
8201-810-744000	CONTRACT SERVICES	65,080.00	9,200.00	2,820.00	14%
8201-810-745000	MAINTENANCE	31,338.28	6,261.54	2,009.19	20%
8201-810-746000	RENTS & LEASES	5,000.00	0.00	0.00	0%
8201-810-746200	UTILITIES	55,000.00	4,321.64	3,652.37	8%
8201-810-751000	SMALL EQUIPMENT	12,446.71	2,293.31	0.00	18%
8201-810-797100	FEES - STATE	190,705.00	51,941.70	272.50	27%
8201-810-830000	ADVANCES OUT	30,000.00	40,000.00	0.00	133%
8201-810-850000	TRANSFERS OUT	200,000.00	30,000.00	0.00	15%
Total Dept 810 - CCCHD		3,261,648.93	546,622.00	202,121.97	17%
TOTAL EXPENDITURES		3,261,648.93	546,622.00	202,121.97	17%
Fund 8201 - HEALTH DISTRICT:					
TOTAL REVENUES		3,367,844.00	247,766.00	81,455.78	
TOTAL EXPENDITURES		3,261,648.93	546,622.00	202,121.97	
NET OF REVENUES & EXPENDITURES		106,195.07	(298,856.00)	(120,666.19)	



03/10/2022

CASH SUMMARY BY FUND FOR CLARK COUNTY  
FROM 02/01/2022 TO 02/28/2022  
FUND: ALL FUNDS  
CASH AND INVESTMENT ACCOUNTS

Fund	Description	Beginning Balance 02/01/2022	Total Debits	Total Credits	Ending Balance 02/28/2022
8201	HEALTH DISTRICT	1,659,679.22	81,794.62	202,460.81	1,539,013.03
8202	FOOD SERVICE	19,422.39	151,658.32	12,478.56	158,602.15
8203	SOLID WASTE	31,928.32	0.00	15,549.34	16,378.98
8204	RECREATION PARKS & CAMPS	7,559.46	0.00	0.00	7,559.46
8205	WATER SYSTEMS	38,052.56	3,612.29	7,677.66	33,987.19
8206	SWIMMING POOL	5,857.74	0.00	517.50	5,340.24
8207	MOSQUITO CONTROL GRANT	2,638.22	0.00	0.00	2,638.22
8208	MEDICAID ADMIN CLAIM	139,144.20	39,896.05	3,781.94	175,258.31
8209	HIV GRANT	11,803.19	50.05	4,879.76	6,973.48
8211	DRUG OVERDOSE PREVENTION	9,680.22	0.00	12,466.79	(2,786.57) *received \$36,833.33 beginning of March
8212	EARLY START GRANT	444,661.09	29,061.97	44,004.29	429,718.77
8213	CRIBS FOR KIDS	16,098.72	4,750.00	3,887.70	16,961.02
8214	IMMUNIZATION GRANT	32,873.87	0.00	3,652.37	29,221.50
8217	PLUMBING	88,592.20	11,433.32	10,546.87	89,478.65
8220	WIC	58,277.90	63,713.91	61,196.80	60,795.01
8222	VACCINE EQUITY GRANT	169.05	0.00	0.00	169.05
8223	COVID-19	34,955.26	0.00	0.00	34,955.26
8224	OIMRI GRANT	25,406.93	0.00	7,335.73	18,071.20
8225	WATER POLLUTION CONTROL GRANT	36,146.19	16,307.50	16,000.00	36,453.69
8226	MOM QUIT FOR TWO	3,025.25	0.00	3,847.95	(822.70)
8227	SAFE COMMUNITIES GRANT	1,532.44	992.28	1,776.81	747.91
8228	TOBACCO USE PREVENTION	48,849.08	0.00	5,030.39	43,818.69
8229	CONTINGENCY	250,000.00	0.00	0.00	250,000.00
8231	COVID 19 VACCINATION GRANT FUND	(3,225.07)	43,225.07	23,515.55	16,484.45
8233	HL PREVENTION GRANT	6,947.38	188.64	454.28	6,681.74
8237	PUBLIC INFRASTRUCTURE	36,744.27	770.00	12,754.51	24,759.76
8238	SW NON DIST	24,404.72	160.00	0.00	24,564.72
8239	LEAVE ACCRUAL	49,669.70	0.00	0.00	49,669.70
8240	ENVIRONMENTAL SERVICES	26,650.54	245.00	10,970.69	15,924.85
8246	CD&D FUND	21,793.33	5,256.80	1,757.30	25,292.83
8247	WORKFORCE DEVELOPMENT	14,251.32	10,748.68	10,662.52	14,337.48
8248	SEWAGE TREATMENT SYSTEMS	6,276.02	2,133.00	9,371.71	(962.69)
8251	COVID 19 - ENHANCED OPERATIONS	66,390.83	75,792.71	31,117.24	111,066.30
8252	CONTACT TRACING	16,332.23	0.00	0.00	16,332.23
8257	FHV	38,229.77	39,756.72	39,435.24	38,551.25
8259	MSG GRANT	45,869.93	0.00	0.00	45,869.93
8260	HEALTH - CHC	40,884.70	0.00	4,633.92	36,250.78
8261	REPRODUCTIVE HEALTH AND WELLNESS (RHW)	210,871.35	35,170.67	28,845.21	217,196.81
8262	MATERNAL & CHILD HEALTH PROGRAM (MCHP)	43,742.04	0.00	4,791.32	38,950.72
	TOTAL - ALL FUNDS	3,612,186.56	616,717.60	595,400.76	3,633,503.40

VITAL STATISTICS													
2022 DEATH REPORT													
Death Certificates Issued in FEB - 778													
<i>Cause of Death - 2022</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total
Heart Disease	52	41											93
Cancer	18	19											37
Chronic Lower Respiratory Disease	8	6											14
Accidents	4	1											5
Cerebrovascular Disease	15	17											32
Alzheimer's Disease	14	11											25
Drug Intoxication	2	0											2
Diabetes	1	1											2
Influenza/Pneumonia	11	8											19
Kidney Related Disease	2	1											3
Septicemia	9	6											15
Suicide	1	0											1
Liver Disease/Cirrhosis	2	0											2
Hypertension	0	1											1
Parkinson's Disease	4	1											5
Other	81	79											160
Pending	3	15											18
<b>Totals</b>	<b>227</b>	<b>207</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>434</b>
<i>Causes of Death - 2021</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total
Heart Disease	43	35	43	45	30	41	40	44	44	41	44	51	501
Cancer	21	21	22	16	20	21	23	15	25	19	20	22	245
Chronic Lower Respiratory Disease	7	3	6	8	6	7	5	1	3	3	3	8	60
Accidents	4	4	2	9	6	8	4	2	3	1	2	2	47
Cerebrovascular Disease	5	3	7	9	9	10	4	16	11	10	15	16	115
Alzheimer's Disease	8	8	10	10	2	9	6	10	8	13	9	8	101
Drug Intoxication	10	8	4	6	4	7	15	7	6	7	2	3	79
Diabetes	1	1	0	1	0	3	4	1	1	2	0	0	14
Influenza/Pneumonia	9	2	3	3	0	3	6	6	3	10	8	8	61
Kidney Related Disease	6	5	1	3	2	4	3	2	4	3	0	3	36
Septicemia	6	7	8	1	7	6	2	2	4	3	10	5	61
Suicide	3	4	2	4	0	3	0	0	2	3	3	1	25
Liver Disease/Cirrhosis	6	4	1	0	0	1	5	1	2	1	2	4	27
Hypertension	2	0	2	0	0	1	1	0	0	1	0	0	7
Parkinson's Disease	0	3	0	0	1	3	1	1	0	0	0	0	9
Other	60	35	21	43	23	27	23	28	33	46	52	55	446
Pending	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Totals</b>	<b>191</b>	<b>143</b>	<b>132</b>	<b>158</b>	<b>110</b>	<b>154</b>	<b>142</b>	<b>136</b>	<b>149</b>	<b>163</b>	<b>170</b>	<b>186</b>	<b>1,834</b>

**"Other" Causes of Death - February 2022**

Acute Intraventricular hemorrhage	1
ALS	1
COVID	65
Failure To Thrive	1
Fetal	1
Gastrointestinal Hemorrhage	1
Ischemic Bowel	2
Multi System Organ Failure	1
Pulmonary Embolism	1
Respiratory Failure	4
Sleep Apnea	1
<b>TOTAL</b>	<b>79</b>

**3 YEAR COMPARATIVE  
BIRTH DATA**

Birth Certificates Issued In Feb - 558

**4E**

<i>Total Births</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total	Previous 12 Month Avg
2022	79	89											168	88
2021	91	79	87	94	73	95	88	91	81	93	81	100	1,053	90
2020	84	91	103	93	81	98	99	98	86	86	76	92	1,087	98
<b>No. of LBW Newborns</b>														
2022	6	6											12	6
2021	9	4	8	10	6	7	5	1	5	6	5	7	73	7
2020	11	13	9	4	5	12	9	7	6	8	4	7	95	9
2022	7.59%	6.74%											7.14%	6.85%
2021	9.89%	5.06%	9.20%	10.64%	8.22%	7.37%	5.68%	1.10%	6.17%	6.45%	6.17%	7.00%	6.93%	7.76%
2020	13.10%	14.29%	8.74%	4.30%	6.17%	12.24%	9.09%	7.14%	6.98%	9.30%	5.26%	7.61%	8.74%	9.34%
<b>Mothers' Ages</b>														
<b>Age 0-14</b>														
2022	1	0											1	0.3
2021	0	0	1	0	0	0	0	0	1	0	0	1	3	0.1
2020	0	1	0	0	0	0	0	0	0	0	0	1	2	0.2
<b>Age 15-19</b>														
2022	8	13											21	8
2021	11	7	11	9	7	9	5	9	3	6	5	13	95	9
2020	12	11	12	7	7	8	6	10	10	12	8	8	111	9
<b>Age 20-24</b>														
2022	30	19											49	28
2021	26	26	32	24	20	34	25	32	23	34	32	25	333	27
2020	30	30	35	35	24	31	30	22	29	21	20	27	334	32
<b>Age 25+</b>														
2022	40	57											97	52
2021	54	46	43	61	46	52	58	50	54	53	44	61	622	54
2020	42	47	56	51	50	59	63	66	47	53	48	56	638	56

Feb

03/04/2022

INVOICE GL DISTRIBUTION REPORT FOR CLARK COUNTY  
INVOICE ENTRY DATES 02/01/2022 - 02/28/2022  
BOTH JOURNALIZED AND UNJOURNALIZED  
PAID

Invoice Line Desc	Vendor	Amount
Fund 8201 HEALTH DISTRICT		
TRAINING ALLIES AND ADVOCATES EVENT	CARDMEMBER SERVICES	53.62
TRAVEL - DEC/JAN MILEAGE	VIRGINIA ABSHEAR	28.00
DEC/JAN CELL	ALICIA SEHEN	60.00
MILEAGE - JAN22	EMILY GRIESER	22.00
MILEAGE - DEC/JAN	JESSICA C BUMGARNER	82.14
MILEAGE - JAN	JO WINDON	57.00
CELL JAN	JO WINDON	15.00
MILEAGE - JAN	SALIMAH BERRIEN	11.00
TRAVEL - FUEL	SUPERFLEET MASTERCARD PROGRAM	254.48
TRAVEL - JAN22 CELL REIMBURSEMENT	TINA FISHER	25.00
HONDA CRV JAN PAYMENT	HONDA FINANCIAL SERVICES	356.67
SUPPLIES - SOUTHERN VILLAGE FLOORMAT	CARDMEMBER SERVICES	12.67
NSG SUPPLIES - CONDOM DISPENSERS	CARDMEMBER SERVICES	925.68
SUPPLIES - GENERIC BENADRYL	CARDMEMBER SERVICES	10.00
SUPPLIES - OEHA MEMBERSHIP REIMBURSEMENT	CHRIS COOK	63.00
SUPPLIES - FINGERPRINTING	CLARK CO EDUCATIONAL SERVICE	240.00
NSG SUPPLIES - SYRINGES	DAVE PURCHASE PROJECT/NASEN	729.98
SUPPLIES - TB TESTING CHARGES	PATHOLOGY LABORTORIES INC	360.75
NSG SUPPLIES - IMOVAX	SANOFI PASTEUR INC	1,257.58
NSG SUPPLIES - ENGERIX AND SHINGRIX	GLAXO SMITH KLINE PHARMACEUTICALS	5,311.18
POSTAGE METER LEASE	QUADIENT LEASING USA INC	171.54
NSG SUPPLIES - DATA LOGGER CALIBRATION	SUPPLY LINK INC	157.00
NSG SUPPLIES - DATA LOGGER CALIBRATION	SUPPLY LINK INC	201.50
CLINICAL LEAD LAB APPROVAL APPLICATION	TREASURER STATE OF OHIO	300.00
SUPPLIES - YEARLY CANVA SUBSCRIPTION	CARDMEMBER SERVICES	119.40

SUPPLIES - CLARK CO TWP MEETING COST	CLARK COUNTY TOWNSHIP ASSOC	120.00
SUPPLIES - GR SPFLD PARTNERSHIP MEETING	CARDMEMBER SERVICES	225.00
NSG SUPPLIES - SURVEYMONKEY SUBSCRIPTION	CARDMEMBER SERVICES	60.06
HONDA ODYSSEY ACCT443480036 FEB PAYMENT	HONDA FINANCIAL SERVICES	397.65
NSG SUPPLIES - SHARPS WALL BRACKET	MCKESSON MEDICAL-SURGICAL	71.65
NSG SUPPLIES - HEPATITIS TESTS	MCKESSON MEDICAL-SURGICAL	429.03
ADMIN SUPPLIES	AMAZON CAPITAL SERVICES INC	71.20
SUPPLIES - FLAGGING TAPE	AMAZON CAPITAL SERVICES INC	16.81
SUPPLIES - ICE MELT	STAPLES BUSINESS ADVANTAGE	209.90
SUPPLIES - CARPET CLEANING LEFFEL LN JAN	ABSOLUTE CLEAN	2,500.00
INTERPRETER SERVICES	INTERPRETERS OF THE DEAF LLC	81.41
NSG SUPPLIES - SHREDDING	OHIO MOBILE SHREDDING LCC	44.69
NSG SUPPLIES - EPIPEN AUTOINJECTORS	CAPITAL WHOLESALE DRUG	0.40
DEC INFANT VITALITY COORDINATOR PAYMENT	ANNMARIE SCHMERSAL	2,333.00
JAN INFANT VITALITY COORDINATOR PAYMENT	ANNMARIE SCHMERSAL	2,333.00
ADMIN SUPPLIES -	AMAZON CAPITAL SERVICES INC	340.67
LEADSUPPLIES - BUSINESSCARDS ERIC/LESLIE	CARDMEMBER SERVICES	72.99
LEAD SUPPLIES - LESLIE VASQUEZ DRUG TEST	CITRAN OCCUPATIONAL HEALTH LLC	90.00
SUPPLIES - CELL REIMBURSAL JAN/FEB22	ERIC BURKITT	50.00
LEAD SUPPLIES JAN22 CELL REIMBURSAL	LESLIE VASQUEZ	25.00
CONTRACT SERVICES	TINA LEFAIVE	1,440.00
CONTRACT SERVICES COMPLETEIT	BLUEPRINT CYBER ENGINEERING	4,250.00
FAITH BASED NSG 01/30 - 02/12	TINA LEFAIVE	2,400.00
MAINT - REFRIGERATOR LINE	A T & T	171.34
MAINTENANCE - HOME RD SPECTRUM	CHARTER COMMUNICATIONS	727.79
MAINTENANCE - MED WASTE DISPOSAL	SPECIAL WASTE SYSTEMS INC	370.00
MAINTENANCE - MEDICAL WASTE DISPOSAL	SPECIAL WASTE SYSTEMS INC	155.00
MAINTENANCE WORKER 01/05-01/26	CLARK CO BD OF DEVELOPMENTAL	136.00
PREVENTATIVE MAINTENANCE PLAN Q-FEB22	HAUCK BROS INC	815.75
SALT LOT/ICE MELT	GILLAM LANDSCAPING	116.00
MAINTENANCE	ABSOLUTE CLEAN	235.00
UTILITIES - COLUMBIA GAS	COLUMBIA GAS OF OHIO	109.14
UTILITIES - FIRSTNET	A T & T MOBILITY	917.68
UTILITIES - SPECTRUM INTERNET	TIME WARNER CABLE	64.98

UTILITIES - COLUMBIA GAS FEB22	COLUMBIA GAS OF OHIO	992.80
UTILITIES - HOME RD PHONES	CHARTER COMMUNICATIONS	578.00
UTILITIES - HOME ROAD GAS	COLUMBIA GAS OF OHIO	172.91
UTILITIES - WATER/SEWER HOME RD JAN22	CITY OF SPRINGFIELD	331.43
UTILITIES - WASTE AND RECYCLING	RUMPKE	194.74
BURIAL PERMITS - JAN	OHIO DIVISION OF REAL ESTATE	272.50
	Total For Dept 810 CCCHD	<u>34,748.71</u>

Total For Fund 8201 HEALTH DISTRICT 34,748.71

Fund 8202 FOOD SERVICE

MILEAGE	MONICA JANES	25.00
MILEAGE - JAN22	MEGAN DAVIS	3.50
CELL PHONE REIMBURSEMENT JAN22	MEGAN DAVIS	25.00
MILEAGE - JAN22	JESSICA BEIKE	40.00
MILEAGE -	SUPERFLEET MASTERCARD PROGRAM	49.53
SUPPLIES - ENVELOPES	AMAZON CAPITAL SERVICES INC	88.00
FSO STATE FEES - JAN	TREASURER STATE OF OHIO	56.00
CRV LEASE JAN22 8202	HONDA FINANCIAL SERVICES	324.02
CRV LEASE JAN 22 8202	HONDA FINANCIAL SERVICES	324.02
CRV LEASE JAN22 8202	HONDA FINANCIAL SERVICES	324.01
	Total For Dept 810 CCCHD	<u>1,259.08</u>

Total For Fund 8202 FOOD SERVICE 1,259.08

Fund 8203 SOLID WASTE

CELL REIMBURSEMENT JAN22	MONICA JANES	25.00
CELL REIMBURSEMENT JAN22	EMILY GRIESER	25.00
CELL REIMBURSEMENT JAN22	JESSICA BEIKE	25.00
MILEAGE - FUEL	SUPERFLEET MASTERCARD PROGRAM	87.91
JAN22 CIVIC 8203	HONDA FINANCIAL SERVICES	244.50
JAN22 CIVIC LEASE 8203	HONDA FINANCIAL SERVICES	244.50
CIVIC LEASE JAN22 8203	HONDA FINANCIAL SERVICES	244.46
	Total For Dept 810 CCCHD	<u>896.37</u>

	Total For Fund 8203 SOLID WASTE	896.37
Fund 8205 WATER SYSTEMS		
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	55.10
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	55.10
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	49.50
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	149.40
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	27.55
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	32.75
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	82.65
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	31.60
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	110.20
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	161.35
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	17.85
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	81.10
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	82.65
WATER TESTING CHGS	MOBILE ANALYTICAL SERVICES INC	23.60
	Total For Dept 810 CCCHD	960.40
	Total For Fund 8205 WATER SYSTEMS	960.40
Fund 8206 SWIMMING POOL		
CERTIFICATION FEES - POOL HEA 5112	TREASURER STATE OF OHIO	517.50
	Total For Dept 810 CCCHD	517.50
	Total For Fund 8206 SWIMMING POOL	517.50
Fund 8208 MEDICAID ADMIN CLAIM		
SUPPLIES	CITRAN OCCUPATIONAL HEALTH LLC	170.00
SUPPLIES - KALLI LUTHI DRUG TESTING	CITRAN OCCUPATIONAL HEALTH LLC	90.00
SUPPLIES - OFFICE DESKS	AMAZON CAPITAL SERVICES INC	1,593.32
UTILITIES - SUNSET AVE SECURITY	SHIVER SECURITY SYSTEMS INC	85.00
UTILITIES - COLUMBIA GAS SUNSETAVE FEB22	COLUMBIA GAS OF OHIO	355.21

UTILITIES - SPECTRUM INTERNET	TIME WARNER CABLE	64.98
UTILITIES - SUNSET AVE	OHIO EDISON	181.29
UTILITIES - WATER/SEWER SUNSET AVE	CITY OF SPRINGFIELD	33.33
	Total For Dept 810 CCCHD	<u>2,573.13</u>
	Total For Fund 8208 MEDICAID ADMIN C	<u><u>2,573.13</u></u>
Fund 8211 DRUG OVERDOSE PREVENTION		
ONE2ONE DOOR MAGNET	BOX KING	65.00
	Total For Dept 810 CCCHD	<u>65.00</u>
	Total For Fund 8211 DRUG OVERDOSE P	<u><u>65.00</u></u>
Fund 8212 EARLY START GRANT		
MILEAGE - JAN22	AIMEE HAMILTON	84.00
MILEAGE - JAN22	AMY TAYLOR	42.00
MILEAGE - JAN22	ANTIONETTE PEREZ	13.50
MILEAGE - JAN22	ESTHER KEYES	27.50
MILEAGE - JAN22	KAREN BRUBAKER	38.50
MILEAGE -	KRISTINA FULK	48.50
MILEAGE - JAN22	MICHELINE DRUGMAN-DEWITT	3.00
MILEAGE - DEC-FEB22	LORI LAMBERT	29.00
SUPPLIES - BABY DIAPERS AND WIPES	AMAZON CAPITAL SERVICES INC	5,391.67
MAINT - E HIGH 01/06-01/27	CLARK CO BD OF DEVELOPMENTAL	13.60
HIGH ST LEASE -	COMMUNITY HEALTH FOUNDATION	470.07
UTILITIES - FIRSTNET	A T & T MOBILITY	264.02
UTILITIES - SPECTRUM	CHARTER COMMUNICATIONS	16.00
UTILITIES - SPECTRUM	CARDMEMBER SERVICES	39.98
UTILITIES - ALARMS	SHIVER SECURITY SYSTEMS INC	15.93
UTILITIES - SANITATION	AMAZON CAPITAL SERVICES INC	31.70
UTILITIES -	OHIO MOBILE SHREDDING LCC	4.47
UTILITIES -	RUMPKE	18.73
UTILITIES - WATER/SEWER	CITY OF SPRINGFIELD	14.73
	Total For Dept 810 CCCHD	<u>6,566.90</u>



	Total For Fund 8212 EARLY START GRAN	6,566.90
Fund 8213 CRIBS FOR KIDS		
SUPPLIES- MAINT WORKER EHIGH 01/06-01/27	CLARK CO BD OF DEVELOPMENTAL	2.72
HIGH ST LEASE -	COMMUNITY HEALTH FOUNDATION	94.01
UTILITIES - SPECTRUM	CHARTER COMMUNICATIONS	3.20
UTILITIES - SPECTRUM	CARDMEMBER SERVICES	8.00
UTILITIES - ALARMS	SHIVER SECURITY SYSTEMS INC	3.19
UTILITIES - SANITATION	AMAZON CAPITAL SERVICES INC	6.34
UTILITIES -	OHIO MOBILE SHREDDING LCC	0.89
UTILITIES -	RUMPKE	3.75
UTILITIES - WATER/SEWER	CITY OF SPRINGFIELD	2.95
	Total For Dept 810 CCCHD	125.05
	Total For Fund 8213 CRIBS FOR KIDS	125.05
Fund 8217 PLUMBING		
CELL REIMBURSEMENT JAN22	ELIZABETH DEWITT	25.00
MILEAGE - JAN22	ELIZABETH DEWITT	12.00
MILEAGE - FUEL	SUPERFLEET MASTERCARD PROGRAM	153.68
LAMINATING POUCHES (SUPPLIES)	AMAZON CAPITAL SERVICES INC	54.96
CONT SERV - JAN22 PLBG	GREENE COUNTY PUBLIC HEALTH	357.48
CONT SERV - PLUMBING MIAMI CO	MIAMI COUNTY PUBLIC HEALTH	177.43
	Total For Dept 810 CCCHD	780.55
	Total For Fund 8217 PLUMBING	780.55
Fund 8220 WIC		
MILEAGE - JAN	EMILY THOMAS	8.00
CELL - JAN	EMILY THOMAS	25.00
SPECTRUM	CHARTER COMMUNICATIONS	139.94
SUPPLIES - FINGERPRINTING	CLARK CO EDUCATIONAL SERVICE	60.00
SUPPLIES	CITRAN OCCUPATIONAL HEALTH LLC	85.00

SUPPLIES - HAND SANITIZER, ENVELOPES  
 MAINT - E HIGH 01/06-01/27  
 HIGH ST LEASE -  
 UTILITIES - FIRSTNET  
 UTILITIES - SPECTRUM  
 UTILITIES - SPECTRUM  
 UTILITIES - ALARMS  
 UTILITIES - SANITATION  
 UTILITIES  
 UTILITIES  
 UTILITIES - WATER/SEWER

AMAZON CAPITAL SERVICES INC	162.65
CLARK CO BD OF DEVELOPMENTAL	88.40
COMMUNITY HEALTH FOUNDATION	3,055.48
A T & T MOBILITY	179.36
CHARTER COMMUNICATIONS	104.02
CARDMEMBER SERVICES	259.88
SHIVER SECURITY SYSTEMS INC	103.55
AMAZON CAPITAL SERVICES INC	206.06
OHIO MOBILE SHREDDING LCC	29.05
RUMPKE	121.75
CITY OF SPRINGFIELD	95.77
Total For Dept 810 CCCHD	<u>4,723.91</u>

Total For Fund 8220 WIC	<u><u>4,723.91</u></u>
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Fund 8224 OIMRI GRANT

MILEAGE - JAN22  
 CELL REIMBURSEMENT JAN22  
 SUPPLIES - FINGERPRINTING  
 MAINT - E HIGH 01/06-01/27  
 HIGH ST LEASE -  
 UTILITIES - SPECTRUM  
 UTILITIES - SPECTRUM  
 UTILITIES - ALARMS  
 UTILITIES - SANITATION  
 UTILITIES -  
 UTILITIES -  
 UTILITIES - WATER/SEWER

NATALIE OLIVER	39.00
NATALIE OLIVER	15.00
CLARK CO EDUCATIONAL SERVICE	60.00
CLARK CO BD OF DEVELOPMENTAL	6.80
COMMUNITY HEALTH FOUNDATION	235.03
CHARTER COMMUNICATIONS	8.00
CARDMEMBER SERVICES	19.99
SHIVER SECURITY SYSTEMS INC	7.95
AMAZON CAPITAL SERVICES INC	15.85
OHIO MOBILE SHREDDING LCC	2.24
RUMPKE	9.36
CITY OF SPRINGFIELD	7.37
Total For Dept 810 CCCHD	<u>426.59</u>

Total For Fund 8224 OIMRI GRANT	<u><u>426.59</u></u>
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Fund 8226 MOM QUIT FOR TWO

MILEAGE - JAN22	NATALIE OLIVER	4.00
MAINT - E HIGH 01/06-01/27	CLARK CO BD OF DEVELOPMENTAL	2.72
HIGH ST LEASE -	COMMUNITY HEALTH FOUNDATION	94.01
UTILITIES - SPECTRUM	CHARTER COMMUNICATIONS	3.20
UTILITIES - SPECTRUM	CARDMEMBER SERVICES	8.00
UTILITIES - ALARMS	SHIVER SECURITY SYSTEMS INC	3.19
UTILITIES - SANITATION	AMAZON CAPITAL SERVICES INC	6.34
UTILITIES -	OHIO MOBILE SHREDDING LCC	0.89
UTILITIES -	RUMPKE	3.75
UTILITIES - WATER/SEWER	CITY OF SPRINGFIELD	2.95
	Total For Dept 810 CCCHD	<u>129.05</u>
	Total For Fund 8226 MOM QUIT FOR TW	<u><u>129.05</u></u>

Fund 8227 SAFE COMMUNITIES GRANT

MILEAGE - JAN	LESLIE STINE	29.00
MAINTENANCE - 5000 STICKERS	BOX KING	389.00
	Total For Dept 810 CCCHD	<u>418.00</u>
	Total For Fund 8227 SAFE COMMUNITIE!	<u><u>418.00</u></u>

Fund 8228 TOBACCO USE PREVENTION

MILEAGE - 1/10-2/1	LEAH BEHLER	59.75
SUPPLIES - VISTAPRINT STICKERS	CARDMEMBER SERVICES	71.39
SUPPLIES - LEAH BEHLER BUSINESS CARDS	BOX KING	85.00
SUPPLIES - TOBACCO POSTCARDS	BOX KING	185.00
SUPPLIES - LEAH BEHLER DRUG TESTING	CITRAN OCCUPATIONAL HEALTH LLC	90.00
	Total For Dept 810 CCCHD	<u>491.14</u>
	Total For Fund 8228 TOBACCO USE PREV	<u><u>491.14</u></u>

Fund 8231 COVID 19 VACCINATION GRANT FUND

CLIENT EXPENSES KROGER VISA GIFT CARDS	CASHSTAR INC	12,700.00
SUPPLIES - KROGER VISA GIFT CARD FEES	CASHSTAR INC	501.65
	Total For Dept 810 CCCHD	<u>13,201.65</u>
	Total For Fund 8231 COVID 19 VACCINATION	<u><u>13,201.65</u></u>

Fund 8233 HL PREVENTION GRANT

SUPPLIES - DEC HOURS PERSONNEL REIMBURSE	CLARK COUNTY COMBINED HEALTH	27.21
	Total For Dept 810 CCCHD	<u>27.21</u>
	Total For Fund 8233 HL PREVENTION GR	<u><u>27.21</u></u>

Fund 8237 PUBLIC INFRASTRUCTURE

DEC21/JAN22 CELL REIMB	STEPHANIE JOHNSON	60.00
JAN CELL	BRENNA HEINLE	30.00
SUPPLIES - MARCS RADIOS	OHIO TREASURER OF STATE	30.00
SUPPLIES - PREP 2022 SUMMIT REG	NACCHO	635.00
	Total For Dept 810 CCCHD	<u>755.00</u>
	Total For Fund 8237 PUBLIC INFRASTRUCTURE	<u><u>755.00</u></u>

Fund 8240 ENVIRONMENTAL SERVICES

MILEAGE - JAN	ANNE KAUP-FETT	19.50
MILEAGE -	SUPERFLEET MASTERCARD PROGRAM	137.12
SUPPLIES - FIRSTNET	A T & T MOBILITY	79.64
SELF-INK STAMPS	AMAZON CAPITAL SERVICES INC	60.75
SUPPLIES - OEHA REIMBURSEMENT	ANNE KAUP-FETT	40.00
SUPPLIES - POOL	TAYLOR TECHNOLOGIES INC	134.72
LEASE - 8240 CRV JAN22	HONDA FINANCIAL SERVICES	324.01
	Total For Dept 810 CCCHD	<u>795.74</u>
	Total For Fund 8240 ENVIRONMENTAL S	<u><u>795.74</u></u>

Fund 8248 SEWAGE TREATMENT SYSTEMS

SEWAGE FEES - JAN	TREASURER STATE OF OHIO	257.00
	Total For Dept 810 CCCHD	<u>257.00</u>
	Total For Fund 8248 SEWAGE TREATMEN	<u><u>257.00</u></u>

Fund 8251 COVID 19 - ENHANCED OPERATIONS

MILEAGE - JAN22	MONICA JANES	10.00
MILEAGE	MICHAEL A SCHULSINGER	436.81
MILEAGE - JAN22	EMILY GRIESER	2.50
MILEAGE - JAN	SALIMAH BERRIEN	5.00
SUPPLIES - FIRSTNET	A T & T MOBILITY	104.07
SUPPLIES - SPECTRUM INTERNET	TIME WARNER CABLE	64.98
MEDICAL WASTE DISPOSAL	SPECIAL WASTE SYSTEMS INC	220.00
MEDICAL WASTE DISPOSAL	SPECIAL WASTE SYSTEMS INC	185.00
COVID TRANSPORT	MICHAEL A SCHULSINGER	312.50
SUPPLIES	ABSOLUTE CLEAN	1,500.00
SUPPLIES - COVID TRANSPORT HOURS	MICHAEL A SCHULSINGER	200.00
	Total For Dept 810 CCCHD	<u>3,040.86</u>
	Total For Fund 8251 COVID 19 - ENHANC	<u><u>3,040.86</u></u>

Fund 8257 FHV

MILEAGE - JAN22	PAM EGGLESTON	35.00
MILEAGE - JAN22	AIMEE HAMILTON	134.00
MILEAGE -	AIMEE HAMILTON	15.00
MILEAGE - JAN22	AMY TAYLOR	22.00
CELL REIMBURSEMENT JAN22	AMY TAYLOR	15.00
MILEAGE - JAN22	ANTIONETTE PEREZ	60.50
MILEAGE - JAN22	ESTHER KEYES	37.50
CELL REIMBURSEMENT JAN22	ESTHER KEYES	15.00
MILEAGE - JAN22	KAREN BRUBAKER	25.50
MILEAGE -	KRISTINA FULK	28.00

CELL REIMBURSEMENT JAN22	KRISTINA FULK	7.50
MILEAGE - JAN22	MICHELINE DRUGMAN-DEWITT	22.00
JAN22 CELL REIMBURSEMENT	MICHELINE DRUGMAN-DEWITT	15.00
SUPPLIES - CURRICULUM AND SUBSCRIPTION	CARDMEMBER SERVICES	330.00
MAINT - E HIGH 01/06-01/27	CLARK CO BD OF DEVELOPMENTAL	21.76
HIGH ST LEASE	COMMUNITY HEALTH FOUNDATION	752.15
UTILITIES - SPECTRUM	CHARTER COMMUNICATIONS	25.61
UTILITIES - SPECTRUM	CARDMEMBER SERVICES	63.97
UTILITIES - ALARMS	SHIVER SECURITY SYSTEMS INC	25.49
UTILITIES - SANITATION	AMAZON CAPITAL SERVICES INC	50.72
UTILITIES -	OHIO MOBILE SHREDDING LCC	7.15
UTILITIES -	RUMPKE	29.97
UTILITIES - WATER/SEWER	CITY OF SPRINGFIELD	23.57
	Total For Dept 810 CCCHD	<u>1,762.39</u>

Total For Fund 8257 FHV 1,762.39

Fund 8260 HEALTH - CHC

TRAVEL - JAN CELL REIMB	ASHLEY SEIBERT	25.00
TRAVEL - MILEAGE	ASHLEY SEIBERT	36.00
SUPPLIES - FINGERPRINTING	CLARK CO EDUCATIONAL SERVICE	60.00
SUPPLIES - 5-GAL GROW BAGS	CARDMEMBER SERVICES	311.52
	Total For Dept 810 CCCHD	<u>432.52</u>

Total For Fund 8260 HEALTH - CHC 432.52

Fund 8261 REPRODUCTIVE HEALTH AND WELLNESS (RHW)

SUPPLIES - SPEEDWAY GIFT CARDS	CARDMEMBER SERVICES	50.00
SUPPLIES - DOLLAR GENERAL GIFT CARDS	CARDMEMBER SERVICES	100.00
SUPPLIES - FAMILY DOLLAR GIFT CARDS	CARDMEMBER SERVICES	100.00
SUPPLIES - EXAM CAPES BLUE	MCKESSON MEDICAL-SURGICAL	56.51
SUPPLIES - WHITE EXAM CAPES	MCKESSON MEDICAL-SURGICAL	38.54
SUPPLIES - ORAQUICK HIV CONTROLS	MCKESSON MEDICAL-SURGICAL	45.49
SUPPLIES - BICILLIN/LIDOCAINE	CAPITAL WHOLESALE DRUG	33.30

SUPPLIES - HIBICLEANS AND AZITHROMYCIN	CAPITAL WHOLESALE DRUG	55.18
	Total For Dept 810 CCCHD	<u>479.02</u>
	Total For Fund 8261 REPRODUCTIVE HEA	<u><u>479.02</u></u>
Fund 8262 MATERNAL & CHILD HEALTH PROGRAM (MCHP)		
MILEAGE - JAN	LESLIE STINE	16.00
	Total For Dept 810 CCCHD	<u>16.00</u>
	Total For Fund 8262 MATERNAL & CHILC	<u><u>16.00</u></u>

Fund Totals:

34,748.71
1,259.08
896.37
960.40
517.50
2,573.13
65.00
6,566.90
125.05
780.55
4,723.91
426.59
129.05
418.00
491.14
13,201.65
27.21
755.00
795.74
257.00
3,040.86
1,762.39

432.52

479.02

16.00

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75,448.77



The following transfer will be made after approval by the Board of Health at the March 2022 Board meeting.

**Transfer:** From the General Revenue fund to the Sewage Fund  
fund (budgeted). \$30,000 –retroactive to 02/28/2022

The following advance will be made after approval by the Board of Health at the March 2022 Board meeting.

**Advance :** From the General Revenue fund to the Mom’s Quit  
fund (unbudgeted). \$4,000 –retroactive to 02/28/2022

- Each quarter we are averaging between \$14,000-\$15,000 for expenses. This is a deliverable grant and get reimbursed by the deliverable amount and not the time actually spent in the grant each quarter plus maintenance expenses. We want to continue to draw down the money throughout the grant year instead of expending a lump sum at the end of the grant year.



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# CLARK COUNTY YOUTH RISK BEHAVIOR SURVEY

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2021 County-Wide High School Results



JANUARY 21, 2022

CLARK COUNTY COMBINED HEALTH DISTRICT  
529 East Home Road, Springfield, Ohio 45503

# Clark County Youth Risk Behavior Survey (YRBS) 2021

## County-Wide High School Results

### Version 1.2

## Introduction

The Youth Risk Behavior Survey (YRBS) is a survey that monitors health risk behaviors that contribute to the leading causes of death and disability among 9<sup>th</sup>-12<sup>th</sup> grade students. Topics include behaviors that contribute to unintentional injuries and violence, sexual behaviors, alcohol and drug use, tobacco use, dietary behaviors, physical activity, and the prevalence of obesity and asthma.

This report describes county-wide results of the High School YRBS that was administered in October 2021 by the Clark County Combined Health District in collaboration with each individual school district and school.

## Methods

A census was conducted on youth risk behavior with 3,925 students across 14 high schools in Springfield:

Participating Schools	
Catholic Central Sr. High School	Northwestern High School
Springfield-Clark Career Technology Center	School of Innovation
Global Impact Stem Academy (9-12)	Shawnee High School
Greenon High School	Southeastern Sr. High School
Kenton Ridge High School	Springfield City Online (9-12)
Nightingale Montessori (9-12)	Springfield High School
Northeastern High School	Tecumseh High School

The survey was split into categories, including driving habits, violence and weapon carrying, sexual violence, bullying, depression and suicide, tobacco, alcohol, marijuana, drugs, sexual behavior, body weight, dietary behavior, physical activity, and miscellaneous topics.

The data collection method in this census was congruent with the CDC criteria for the YRBS, which suggests a two-stage, cluster sample design. The two-stage cluster sample design was achieved by first conducting a census of every school in the county, then randomly selecting classrooms from each school to analyze. **Since surveys administered in 2011, 2013, 2015 and 2017 were not completed using the two-stage cluster sample design, the data collected in this YRBS CANNOT be compared with results from the Clark County YRBS surveys administered in 2011, 2013, 2015 and 2017.**

All incomplete or invalid responses were removed. The body mass index (BMI) for each student was calculated and values that were biologically implausible, as recommended by the CDC, were removed. Survey answers that were logically inconsistent with one another were also removed. A weight based on student sex, race, ethnicity and grade was applied to each record to adjust for school and student nonresponse.

Demographic variables, including age, sex, race, ethnicity, grade, sexual orientation and gender identity, were reported. The percent (%) and 95% confidence interval were also reported for each question. Additionally, each response was analyzed by sex and race.

The overall response rate for the county-wide high schools was 60.59%. The benchmark for a representative response rate was 60%, therefore this is considered a representative portion of the population.

**Key Findings: Demographics and Statistically Significant Questions (p<0.05)**

These key findings are labeled with Endnotes in the following pages.

The Endnotes are summarized as follows:

1. Indicates a significant difference (p<0.05) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White)
2. Indicates a significant difference (p<0.05) between ages (≤12 years, 13 years, 14 years, 15 years, 16 years, 17 years, and ≥18 years old)
3. Indicates a significant difference (p<0.05) between sexes (female and male)
4. Indicates a significant difference (p<0.05) between Ethnicity (Hispanic and Non-Hispanic)

**Results**

**Population Demographics**

Categories	Overall %	% of Overall Who Are: Sex (Overall %)	
		Female (47.3%)	Male (52.0%)
<b>Age of Students</b>			
12 years or younger <sup>1,4</sup>	0.1%	0.0%	100.0%
13 years <sup>1,4</sup>	0.1%	40.0%	60.0%
14 years <sup>1,4</sup>	20.7%	49.0%	51.0%
15 years <sup>1,4</sup>	26.0%	46.5%	53.5%
16 years <sup>1,4</sup>	25.7%	48.7%	51.3%
17 years <sup>1,4</sup>	22.2%	49.1%	50.9%
18 years or older <sup>1,4</sup>	5.1%	37.4%	62.6%
NA or did not answer <sup>1,4</sup>	0.0%	0.0%	0.0%
<b>Grade</b>			
9th grade	28.7%	46.3%	53.7%
10th grade	26.8%	46.3%	53.7%
11th grade	24.4%	49.3%	50.7%
12th grade	19.8%	49.7%	50.3%
Ungraded or other	0.3%	30.0%	70.0%
NA or did not answer	0.0%	0.0%	0.0%
<b>Hispanic or Latino</b>			
No <sup>1</sup>	89.9%	46.2%	53.8%
Yes <sup>1</sup>	8.9%	47.9%	52.1%
NA or did not answer <sup>1</sup>	1.1%	36.6%	63.4%
<b>Race</b>			
Multi-race <sup>2,4</sup>	10.2%	43.7%	56.3%
American Indian or Alaska Native <sup>2,4</sup>	1.4%	56.6%	43.4%
Asian <sup>2,4</sup>	1.0%	45.9%	54.1%
Black or African American <sup>2,4</sup>	7.5%	45.3%	54.7%
Native Hawaiian or Other Pacific Islander <sup>2,4</sup>	0.5%	50.0%	50.0%
White <sup>2,4</sup>	77.2%	48.0%	52.0%
NA or did not answer <sup>2,4</sup>	2.3%	43.7%	56.3%

Categories	Overall %	% of Overall Who Are: Sex (Overall %)	
		Female (47.3%)	Male (52.0%)
<b>Sex</b>			
Female	47.3%	-	-
Male	52.0%	-	-
NA or did not answer	0.7%	-	-
<b>Sexual Orientation</b>			
Heterosexual <sup>1,2,3,4</sup>	72.0%	39.0%	61.0%
Gay or Lesbian <sup>1,2,3,4</sup>	3.6%	65.5%	34.5%
Bisexual <sup>1,2,3,4</sup>	12.3%	81.8%	18.2%
Not Sure (Questioning) <sup>1,2,3,4</sup>	4.2%	67.5%	32.5%
I describe my sexual identity some other way <sup>1,2,3,4</sup>	4.2%	71.1%	28.9%
Do not know what the question is asking <sup>1,2,3,4</sup>	2.2%	37.7%	62.3%
NA or did not answer <sup>1,2,3,4</sup>	1.5%	39.3%	60.7%
<b>Gender Identity</b>			
Transgender <sup>1,2,3</sup>	3.4%	50.4%	49.6%
Not Transgender <sup>1,2,3</sup>	91.9%	46.7%	53.3%
Unsure if Transgender <sup>1,2,3</sup>	3.3%	78.2%	21.8%
Do not know what the question is asking <sup>1,2,3</sup>	1.1%	29.5%	70.5%
NA or did not answer <sup>1,2,3</sup>	0.3%	36.4%	63.6%

<sup>1</sup> Indicates a significant difference ( $p < 0.05$ ) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White) and the specified demographic/question.

<sup>2</sup> Indicates a significant difference ( $p < 0.05$ ) between ages ( $\leq 12$  years, 13 years, 14 years, 15 years, 16 years, 17 years, and  $\geq 18$  years old) and the specified demographic/question.

<sup>3</sup> Indicates a significant difference ( $p < 0.05$ ) between sexes (female and male) and the specified demographic/question.

<sup>4</sup> Indicates a significant difference ( $p < 0.05$ ) between ethnicity (Hispanic and Non-Hispanic) and the specified demographic/question.

Body Mass Index (BMI)

Weight categories are defined by BMI percentiles. Please see Appendix I for definitions of weight categories by age group and gender.

**Males:**

Weight Categories	Age						
	12 years and younger	13 years	14 years	15 years	16 years	17 years	18 years and older
	%	%	%	%	%	%	%
<b>Underweight</b>	0.0%	0.0%	4.0%	2.3%	5.8%	3.2%	4.5%
<b>Normal</b>	66.7%	0.0%	51.4%	46.6%	48.8%	59.2%	54.5%
<b>Overweight</b>	0.0%	0.0%	17.0%	23.4%	15.4%	13.7%	17.0%
<b>Obese</b>	33.3%	100.0%	27.6%	27.7%	30.0%	23.9%	24.1%

**Females:**

Weight Categories	Age						
	12 years and younger	13 years	14 years	15 years	16 years	17 years	18 years and older
	%	%	%	%	%	%	%
<b>Underweight</b>	0.0%	0.0%	0.9%	1.2%	1.4%	3.3%	3.0%
<b>Normal</b>	0.0%	100.0%	60.1%	57.2%	56.4%	57.2%	55.2%
<b>Overweight</b>	0.0%	0.0%	20.5%	19.0%	19.5%	18.7%	25.4%
<b>Obese</b>	0.0%	0.0%	18.4%	22.6%	22.7%	20.8%	16.4%

**Overall:**

Weight Categories	Overall %	% of Overall Who Are:	
		Female (47.3%)	Male (52.0%)
<b>Underweight</b>	2.9%	29.3%	70.7%
<b>Normal</b>	54.3%	50.2%	49.8%
<b>Overweight</b>	18.5%	50.2%	49.8%
<b>Obese</b>	24.3%	41.0%	59.0%

Weight Categories	Overall %	% of Overall Who Are:	
		Female (47.3%)	Male (52.0%)
<b>Overweight &amp; Obese</b>	38.3%	45.0%	55.0%

Behavior Data

Questions	Overall % (95% confidence interval)	% of Overall Who Are: Sex (Overall %)	
		Female (47.3%)	Male (52.0%)
<b>COVID-19 Pandemic</b>			
Mental health was most of the time or always not good during the COVID-19 Pandemic <sup>1,3</sup>	36.3% (34.8-37.8%)	63.6%	36.4%
Parent or other adult in their home lost their job, even for a short amount of time, during the COVID-19 Pandemic <sup>3</sup>	21.3% (20.1-22.6%)	51.8%	48.2%
<b>Driving Habits</b>			
Rarely or never wore a seat belt when riding a car driven by someone else <sup>1,2,3</sup>	6.7% (5.9-7.5%)	38.1%	61.9%
Rode in a car driven by someone who had been drinking alcohol, at least once in the past 30 days <sup>1,3,4</sup>	14.0% (12.9-15.1%)	52.6%	47.4%
Drove a car after they had been drinking alcohol at least 1 time in the past 30 days <sup>2,4</sup>	5.6% (4.9-6.4%)	41.6%	57.4%
Texted or emailed while driving at least 1 day in the past 30 days <sup>1,2</sup>	16.6% (15.4-17.7%)	48.7%	51.3%
<b>Violence and Weapon Carrying</b>			
Carried a weapon on school property at least 1 day in the past 30 days <sup>1,2,3</sup>	2.7% (2.2-3.2%)	23.3%	76.7%
Carried a gun at least 1 day in the past 12 months <sup>3</sup>	4.0% (3.4-4.6%)	22.9%	77.1%
Did not go to school because they felt unsafe at least 1 day in the past 30 days <sup>1,2,3,4</sup>	9.2% (8.3-10.2%)	58.8%	41.2%
Threatened or injured with a weapon on school property at least once in the past 12 months <sup>2</sup>	6.6% (5.8-7.4%)	45.8%	54.2%
Involved in a physical fight at least once in the past 12 months <sup>1,2,3</sup>	20.4% (19.1-21.7%)	35.2%	64.8%
Involved in a physical fight on school property at least once in the past 12 months <sup>1,2,3</sup>	6.1% (5.4-6.9%)	29.3%	70.7%
Seen someone get physically attacked, beaten, stabbed, or shot in their neighborhood <sup>1,4</sup>	22.7% (21.4-24.1%)	47.5%	52.5%
<b>Sexual Violence</b>			
Forced into having sexual intercourse <sup>1,2,3</sup>	9.8% (8.9-10.8%)	81.9%	18.1%
Forced by anyone into doing sexual things at least once in the past 12 months <sup>1,3</sup>	10.8% (9.8-11.8%)	79.8%	20.2%
Forced into doing sexual things by someone they were dating at least once in the past 12 months <sup>1,2,3</sup>	5.4% (4.7-6.1%)	83.3%	16.7%
Physically hurt by someone they were dating at least once in the past 12 months <sup>3</sup>	5.3% (4.6-6.0%)	61.8%	38.2%
<b>Bullying</b>			
Bullied on school property in the past 12 months <sup>1,2,3</sup>	16.3% (15.2-17.5%)	58.2%	41.8%
Electronically bullied in the past 12 months <sup>1,2,3</sup>	15.9% (14.8-17.1%)	62.5%	37.5%
Victim of teasing or name calling because of race or ethnic background in the past 12 months <sup>1,2,4</sup>	11.8% (10.8-12.8%)	49.2%	50.8%

Questions	Overall % (95% confidence interval)	% of Overall Who Are: Sex (Overall %)	
		Female (47.3%)	Male (52.0%)
Victim of teasing or name calling because of LGBTQ+ status in the past 12 months <sup>1,2,3</sup>	16.2% (15.0-17.3%)	60.5%	39.5%
<b>Depression, Suicide and Mental Health</b>			
Hurt themselves without wanting to kill themselves at least once in the past 12 months <sup>1,2,3</sup>	24.3% (23.0-25.7%)	67.6%	32.4%
Felt sad or hopeless for two weeks or more in a row in the past 12 months <sup>3</sup>	40.1% (38.6-41.6%)	63.8%	36.2%
Seriously considered attempting suicide in the past 12 months <sup>2,3</sup>	20.6% (19.3-21.9%)	66.4%	33.6%
Made a plan to attempt suicide in the past 12 months <sup>3</sup>	17.2% (16.1-18.4%)	66.7%	33.3%
Attempted suicide at least once in the past 12 months <sup>1,3</sup>	9.3% (8.4-10.2%)	65.0%	35.0%
Had to be treated after a suicide attempt in the past 12 months <sup>3</sup>	2.2% (1.7-2.6%)	63.4%	36.6%
<b>Tobacco and Electronic Vapor Products</b>			
Tried smoking a cigarette <sup>1,2</sup>	20.6% (19.3-21.8%)	47.1%	52.9%
Smoked a cigarette before age 13 years old	8.9% (8.0-9.8%)	47.5%	52.5%
Smoked cigarettes at least 1 day in the past 30 days <sup>2</sup>	6.2% (5.5-7.0%)	43.2%	56.8%
Smoked cigarettes on at least 20 days in the past 30 days <sup>2</sup>	1.0% (0.7-1.4%)	34.2%	65.8%
Smoked more than 10 cigarettes per day in the past 30 days <sup>1,2</sup>	0.5% (0.3-0.8%)	30.0%	70.0%
Tried an electronic vapor product <sup>1,2,3</sup>	35.8% (34.3-37.4%)	52.7%	47.3%
Smoked an electronic vapor product at least once in the past 30 days <sup>2,3</sup>	21.1% (19.9-22.5%)	53.8%	46.2%
Smoked an electronic vapor product 20 or more days in the past 30 days <sup>2,3</sup>	7.3% (6.5-8.1%)	55.8%	44.2%
Got their electronic vapor products from a store (a vape shop, gas station, etc.) in the past 30 days <sup>2</sup>	4.0% (3.4-4.7%)	44.2%	55.8%
Used chewing tobacco, snuff, snus, etc. 1 day or more in the past 30 days <sup>1,2,3</sup>	3.6% (3.0-4.2%)	22.1%	77.9%
Smoked cigars, cigarillos, or little cigars on 1 day or more in the past 30 days <sup>1,2,3</sup>	3.7% (3.1-4.3%)	29.3%	70.7%
Did not try to quit using all tobacco products in the past 12 months <sup>2</sup>	12.6% (11.5-13.6%)	49.1%	50.9%
<b>Alcohol</b>			
Had their first drink of alcohol before age 13 years old <sup>1,2</sup>	15.7% (14.5-16.8%)	46.7%	53.3%
Had at least one drink of alcohol on at least 1 day in the past 30 days <sup>1,2,3,4</sup>	23.3% (22.0-24.7%)	52.1%	47.9%
Had 4 drinks or more (female) or 5 drinks or more (male) on at least 1 day in the past 30 days <sup>1,2,4</sup>	17.3% (16.2-18.5%)	48.0%	52.0%



Questions	Overall % (95% confidence interval)	% of Overall Who Are: Sex (Overall %)	
		Female (47.3%)	Male (52.0%)
Had 5 drinks or more in row in the past 30 days <sup>2</sup>	8.3% (7.5-9.2%)	43.6%	56.4%
Usually got their alcohol from someone else in the past 30 days <sup>1,2,3,4</sup>	10.0% (9.0-10.9%)	61.4%	38.6%
<b>Marijuana</b>			
Had used marijuana at least once in their life <sup>1,2,3</sup>	28.4% (27.0-29.7%)	50.6%	49.4%
Tried marijuana for the first time before age 13 years old <sup>1</sup>	6.9% (6.2-7.7%)	50.0%	50.0%
Used marijuana at least once in the past 30 days <sup>1,2,3</sup>	17.0% (15.9-18.2%)	53.2%	46.8%
<b>Drugs</b>			
Have used synthetic marijuana at least once in their life <sup>1,2</sup>	9.0% (8.1-9.9%)	50.0%	50.0%
Have taken non-prescribed pain medication or misused it at least once in their life <sup>3</sup>	12.7% (11.7-13.8%)	56.0%	44.0%
Have used any form of cocaine at least once in their life <sup>1,2,3,4</sup>	3.0% (2.5-3.5%)	36.3%	63.7%
Have sniffed glue, aerosols, paints to get high at least once in their life <sup>2,4</sup>	7.1% (6.3-7.9%)	52.4%	47.6%
Have used heroin at least once in their life <sup>1,2,3,4</sup>	2.5% (2.0-3.0%)	28.4%	71.6%
Have used methamphetamines at least once in their life <sup>1,2,3,4</sup>	2.7% (2.2-3.3%)	29.8%	70.2%
Have used ecstasy at least once in their life <sup>1,2,3,4</sup>	4.0% (3.4-4.6%)	34.6%	65.4%
Used a needle to inject an illegal drug at least once <sup>1,2,3,4</sup>	2.2% (1.8-2.7%)	27.1%	72.9%
Had been offered, sold, or given an illegal drug on school property <sup>2</sup>	10.9% (9.9-11.9%)	48.2%	51.8%
Lived with someone who was having a problem with alcohol or drug use <sup>1,3</sup>	31.6% (30.1-33.0%)	55.7%	44.3%
<b>Sexual Behavior</b>			
Have had sexual intercourse <sup>2</sup>	31.7% (30.3-33.2%)	49.5%	50.5%
First had sexual intercourse before age 13 years old <sup>1,4</sup>	3.5% (3.0-4.1%)	39.8%	60.2%
Had sex with 4 or more people in their life <sup>1,2,3,4</sup>	1.0% (0.7-1.3%)	13.5%	86.5%
Had sex with at least one person in the past 3 months <sup>2,3</sup>	25.0% (23.7-26.4%)	51.5%	48.5%
Used alcohol or drugs the last time before sex <sup>2</sup>	5.1% (4.4-5.8%)	48.2%	51.8%
Used a condom when they last had sex <sup>1,2,3</sup>	15.2% (14.1-16.3%)	43.8%	56.2%
Did not use any method to prevent pregnancy when they last had sex	4.0% (3.4-4.7%)	52.3%	47.7%
Have been or gotten someone pregnant at least once <sup>2</sup>	1.9% (1.5-2.4%)	43.8%	56.2%
Had sexual contact with both males and females <sup>2,3</sup>	5.5% (4.8-6.2%)	78.8%	21.2%
Are non-heterosexual (LGBTQ+) <sup>3</sup>	16.5% (15.4-17.7%)	79.1%	20.9%

Questions	Overall % (95% confidence interval)	% of Overall Who Are: Sex (Overall %)	
		Female (47.3%)	Male (52.0%)
<b>Body Weight</b>			
Self-describe as slightly or very overweight <sup>3,4</sup>	37.2% (35.7-38.8%)	50.2%	49.8%
Not trying to do anything with their weight <sup>2,4</sup>	18.7% (17.5-20.0%)	48.8%	51.2%
Tried to lose or keep from gaining weight in the past 30 days by not eating, taking diet pills, vomiting, taking laxatives or skipping meals <sup>1,2,3</sup>	25.4% (24.1-26.8%)	72.5%	27.5%
<b>Dietary Behavior</b>			
Did not drink 100% fruit juice in the past 7 days <sup>1,3</sup>	37.3% (35.8-38.9%)	51.7%	48.3%
Did not eat fruit in the past 7 days	17.3% (16.1-18.5%)	47.5%	52.5%
Did not eat green salad in the past 7 days <sup>3</sup>	49.9% (48.4-51.5%)	45.7%	54.3%
Did not eat potatoes in the past 7 days <sup>2,3</sup>	39.1% (37.6-40.7%)	51.4%	48.6%
Did not eat carrots in the past 7 days <sup>1,3</sup>	59.7% (58.1-61.2%)	49.3%	50.7%
Did not eat other vegetables in the past 7 days	26.6% (25.3-28.0%)	47.4%	52.6%
Drank a soda or pop at least once per day in the past 7 days <sup>1,3</sup>	27.0% (25.6-28.4%)	52.4%	47.6%
Did not drink a glass of milk at least once in the past 7 days <sup>1,2,3</sup>	34.2% (32.7-35.6%)	63.6%	36.4%
Did not eat breakfast on at least 1 day during the past 7 days <sup>3</sup>	78.1% (76.8-79.5%)	50.5%	49.5%
<b>Physical Activity</b>			
Were active for 60 minutes per day less than 5 days in the past 7 days <sup>1,3,4</sup>	49.5% (47.9-51.1%)	54.0%	46.0%
Spent at least 3 hours a day in front of a TV, computer, other electronic device watching shows or videos playing games or on the internet on an average school day <sup>2,3</sup>	69.1% (67.6-70.6%)	50.5%	49.5%
Do not play on any sports teams in the past 12 months <sup>1,4</sup>	44.8% (43.3-46.4%)	47.8%	52.2%
Got a concussion from playing a sport or being active at least once in the past 12 months <sup>1,2,3</sup>	14.0% (12.9-15.1%)	39.5%	60.5%
<b>Other Health Topics/Miscellaneous</b>			
Have ever had sex education in school <sup>1,2,4</sup>	68.0% (66.5-69.4%)	48.3%	51.7%
At least sometimes went hungry because there wasn't enough food at home in the last 30 days <sup>1,3</sup>	10.3% (9.3-11.3%)	59.5%	40.5%
Have ever been tested for HIV <sup>1,2,3</sup>	5.1% (4.4-5.9%)	56.1%	43.9%
Have ever been tested for a STD other than HIV in the past 12 months <sup>1,2,3</sup>	4.3% (3.6-4.9%)	62.6%	37.4%
Have not seen a dentist at least once in 12 months or more <sup>1,2</sup>	24.9% (23.5-26.3%)	45.5%	54.5%
Mental health was often not good at least most of the time during the past 30 days <sup>1,3,4</sup>	29.2% (27.8-30.6%)	67.4%	32.6%
Get 4 hours or less of sleep on a school night	11.3% (10.3-12.3%)	50.0%	50.0%

Questions	Overall % (95% confidence interval)	% of Overall Who Are: Sex (Overall %)	
		Female (47.3%)	Male (52.0%)
Slept somewhere else besides their parent/guardians, family member or friends house in the past 30 days <sup>1,2,3</sup>	5.7% (4.9-6.4%)	37.2%	62.8%
Did not have a usual place to sleep during the past 30 days <sup>3</sup>	0.4% (0.2-0.6%)	14.3%	85.7%
Rarely or never felt safe and secure in their neighborhood <sup>1,3</sup>	6.3% (5.5-7.1%)	39.8%	60.2%

<sup>1</sup> Indicates a significant difference ( $p < 0.05$ ) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White) and the specified demographic/question.

<sup>2</sup> Indicates a significant difference ( $p < 0.05$ ) between ages ( $\leq 12$  years, 13 years, 14 years, 15 years, 16 years, 17 years, and  $\geq 18$  years old) and the specified demographic/question.

<sup>3</sup> Indicates a significant difference ( $p < 0.05$ ) between sexes (female and male) and the specified demographic/question.

<sup>4</sup> Indicates a significant difference ( $p < 0.05$ ) between ethnicity (Hispanic and Non-Hispanic) and the specified demographic/question.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (1.4%)	Asian (1.0%)	Black or African American (7.5%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (77.2%)	Multi-Race (10.2%)
<b>COVID-19 Pandemic</b>							
Mental health was most of the time or always not good during the COVID-19 Pandemic <sup>1,3</sup>	36.3%	1.4%	0.6%	5.5%	0.5%	80.8%	11.2%
Parent or other adult in their home lost their job, even for a short amount of time, during the COVID-19 Pandemic <sup>3</sup>	21.3%	1.5%	1.1%	7.4%	0.9%	78.8%	10.4%
<b>Driving Habits</b>							
Rarely or never wore a seat belt when riding a car driven by someone else <sup>1,2,3</sup>	6.7%	2.7%	2.7%	14.1%	0.4%	69.9%	10.2%
Rode in a car driven by someone who had been drinking alcohol, at least once in the past 30 days <sup>1,3,4</sup>	14.0%	2.5%	2.3%	6.9%	0.4%	74.8%	13.2%
Drove a car after they had been drinking alcohol at least 1 time in the past 30 days <sup>2,4</sup>	5.6%	2.3%	1.9%	9.8%	0.5%	71.2%	14.4%
Texted or emailed while driving at least 1 day in the past 30 days <sup>1,2</sup>	16.6%	1.6%	2.1%	5.9%	1.0%	80.3%	9.2%
<b>Violence and Weapon Carrying</b>							
Carried a weapon on school property at least 1 day in the past 30 days <sup>1,2,3</sup>	2.7%*	5.8%	1.9%	13.6%	1.0%	62.1%	15.5%
Carried a gun at least 1 day in the past 12 months <sup>3</sup>	4.0%*	3.3%	1.3%	11.2%	0.7%	72.4%	11.2%
Did not go to school because they felt unsafe at least 1 day in the past 30 days <sup>1,2,3,4</sup>	9.2%	2.9%	1.7%	12.6%	0.9%	68.5%	13.5%
Threatened or injured with a weapon on school property at least once in the past 12 months <sup>2</sup>	6.6%	1.6%	1.6%	6.4%	0.4%	76.4%	13.6%
Involved in a physical fight at least once in the past 12 months <sup>1,2,3</sup>	20.4%	2.2%	1.0%	9.5%	0.5%	74.6%	12.3%
Involved in a physical fight on school property at least once in the past 12 months <sup>1,2,3</sup>	6.1%	3.8%	2.1%	13.4%	0.4%	68.9%	11.3%
Seen someone get physically attacked, beaten, stabbed, or shot in their neighborhood <sup>1,4</sup>	22.7%	1.9%	1.0%	10.3%	0.7%	70.9%	15.3%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (1.4%)	Asian (1.0%)	Black or African American (7.5%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (77.2%)	Multi-Race (10.2%)
<b>Sexual Violence</b>							
Forced into having sexual intercourse <sup>1,2,3</sup>	9.8%	3.0%	0.5%	6.5%	0.8%	81.6%	7.6%
Forced by anyone into doing sexual things at least once in the past 12 months <sup>1,3</sup>	10.8%	2.6%	1.4%	4.7%	0.7%	79.8%	10.8%
Forced into doing sexual things by someone they were dating at least once in the past 12 months <sup>1,2,3</sup>	5.4%	2.9%	1.4%	2.4%	1.0%	81.6%	10.6%
Physically hurt by someone they were dating at least once in the past 12 months <sup>3</sup>	5.3%	1.5%	1.5%	8.4%	0.5%	77.8%	10.3%
<b>Bullying</b>							
Bullied on school property in the past 12 months <sup>1,2,3</sup>	16.3%	2.4%	1.4%	4.5%	0.2%	80.5%	11.0%
Electronically bullied in the past 12 months <sup>1,2,3</sup>	15.9%	2.3%	1.0%	3.6%	0.7%	82.1%	10.3%
Victim of teasing or name calling because of race or ethnic background in the past 12 months <sup>1,2,4</sup>	11.8%	3.0%	3.6%	15.2%	1.6%	51.8%	24.8%
Victim of teasing or name calling because of LGBTQ+ status in the past 12 months <sup>1,2,3</sup>	16.2%	1.6%	0.8%	3.4%	0.3%	82.0%	11.9%
<b>Depression, Suicide and Mental Health</b>							
Hurt themselves without wanting to kill themselves at least once in the past 12 months <sup>1,2,3</sup>	24.3%	1.7%	1.0%	4.8%	0.3%	80.3%	11.8%
Felt sad or hopeless for two weeks or more in a row in the past 12 months <sup>3</sup>	40.1%	1.6%	0.7%	7.2%	0.7%	78.8%	10.9%
Seriously considered attempting suicide in the past 12 months <sup>2,3</sup>	20.6%	1.9%	1.4%	6.7%	0.9%	78.0%	11.1%
Made a plan to attempt suicide in the past 12 months <sup>3</sup>	17.2%	1.7%	1.2%	7.0%	0.9%	77.6%	11.6%
Attempted suicide at least once in the past 12 months <sup>1,3</sup>	9.3%	2.3%	2.0%	8.0%	1.1%	72.9%	13.7%
Had to be treated after a suicide attempt in the past 12 months <sup>3</sup>	2.2%*	3.6%	1.2%	9.6%	0.0%	73.5%	12.0%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (1.4%)	Asian (1.0%)	Black or African American (7.5%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (77.2%)	Multi-Race (10.2%)
<b>Tobacco and Electronic Vapor Products</b>							
Tried smoking a cigarette <sup>1,2</sup>	20.6%	1.7%	0.5%	5.7%	0.9%	80.8%	10.4%
Smoked a cigarette before age 13 years old	8.9%	1.8%	0.9%	8.6%	0.0%	76.9%	11.8%
Smoked cigarettes at least 1 day in the past 30 days <sup>2</sup>	6.2%	2.5%	2.1%	5.5%	0.8%	80.2%	8.9%
Smoked cigarettes on at least 20 days in the past 30 days <sup>2</sup>	1.0%*	2.6%	5.3%	7.9%	0.0%	68.4%	15.8%
Smoked more than 10 cigarettes per day in the past 30 days <sup>1,2</sup>	0.5%*	0.0%	9.5%	14.3%	0.0%	57.1%	19.0%
Tried an electronic vapor product <sup>1,2,3</sup>	35.8%	1.5%	0.5%	6.4%	0.7%	78.7%	12.2%
Smoked an electronic vapor product at least once in the past 30 days <sup>2,3</sup>	21.1%	1.7%	0.6%	6.1%	0.4%	78.9%	12.3%
Smoked an electronic vapor product 20 or more days in the past 30 days <sup>2,3</sup>	7.3%	1.1%	1.1%	3.6%	0.4%	84.3%	9.6%
Got their electronic vapor products from a store (a vape shop, gas station, etc.) in the past 30 days <sup>2</sup>	4.0%*	0.6%	0.0%	4.5%	0.6%	86.4%	7.8%
Used chewing tobacco, snuff, snus, etc. 1 day or more in the past 30 days <sup>1,2,3</sup>	3.6%*	2.1%	3.6%	7.9%	0.0%	72.9%	13.6%
Smoked cigars, cigarillos, or little cigars on 1 day or more in the past 30 days <sup>1,2,3</sup>	3.7%*	2.2%	3.6%	10.1%	0.0%	69.8%	14.4%
Did not try to quit using all tobacco products in the past 12 months <sup>2</sup>	12.6%	1.3%	0.8%	9.9%	0.4%	75.1%	12.4%
<b>Alcohol</b>							
Had their first drink of alcohol before age 13 years old <sup>1,2</sup>	15.7%	2.5%	1.0%	10.6%	0.7%	72.8%	12.3%
Had at least one drink of alcohol on at least 1 day in the past 30 days <sup>1,2,3,4</sup>	23.3%	2.1%	1.5%	5.4%	0.9%	79.5%	10.6%
Had 4 drinks or more (female) or 5 drinks or more (male) on at least 1 day in the past 30 days <sup>1,2,4</sup>	17.3%	2.1%	1.1%	4.8%	0.9%	80.8%	10.3%
Had 5 drinks or more in row in the past 30 days <sup>2</sup>	8.3%	1.6%	1.3%	3.8%	0.9%	82.3%	10.1%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (1.4%)	Asian (1.0%)	Black or African American (7.5%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (77.2%)	Multi-Race (10.2%)
Usually got their alcohol from someone else in the past 30 days <sup>1,2,3,4</sup>	10.0%	1.3%	0.8%	3.4%	1.3%	81.5%	11.7%
<b>Marijuana</b>							
Had used marijuana at least once in their life <sup>1,2,3</sup>	28.4%	1.9%	0.8%	8.7%	0.6%	75.0%	13.0%
Tried marijuana for the first time before age 13 years old <sup>1</sup>	6.9%	3.0%	0.4%	10.2%	0.4%	70.5%	15.5%
Used marijuana at least once in the past 30 days <sup>1,2,3</sup>	17.0%	2.2%	0.8%	10.1%	0.9%	75.7%	10.4%
<b>Drugs</b>							
Have used synthetic marijuana at least once in their life <sup>1,2</sup>	9.0%	3.0%	1.2%	7.7%	1.5%	74.6%	12.1%
Have taken non-prescribed pain medication or misused it at least once in their life <sup>3</sup>	12.7%	1.7%	1.3%	8.5%	0.4%	75.0%	13.1%
Have used any form of cocaine at least once in their life <sup>1,2,3,4</sup>	3.0%*	4.4%	3.5%	9.7%	0.9%	68.1%	13.3%
Have sniffed glue, aerosols, paints to get high at least once in their life <sup>2,4</sup>	7.1%	2.2%	1.5%	10.1%	0.0%	72.4%	13.8%
Have used heroin at least once in their life <sup>1,2,3,4</sup>	2.5%*	6.5%	4.3%	12.9%	1.1%	62.4%	12.9%
Have used methamphetamines at least once in their life <sup>1,2,3,4</sup>	2.7%*	3.8%	3.8%	12.5%	1.0%	66.3%	12.5%
Have used ecstasy at least once in their life <sup>1,2,3,4</sup>	4.0%*	3.3%	3.3%	8.6%	0.0%	68.2%	16.6%
Used a needle to inject an illegal drug at least once <sup>1,2,3,4</sup>	2.2%*	6.0%	4.8%	13.1%	1.2%	59.5%	15.5%
Had been offered, sold, or given an illegal drug on school property <sup>2</sup>	10.9%	2.0%	1.0%	7.1%	0.5%	78.0%	11.5%
Lived with someone who was having a problem with alcohol or drug use <sup>1,3</sup>	31.6%	1.6%	0.7%	6.0%	0.3%	78.3%	13.2%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (1.4%)	Asian (1.0%)	Black or African American (7.5%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (77.2%)	Multi-Race (10.2%)
<b>Sexual Behavior</b>							
Have had sexual intercourse <sup>2</sup>	31.7%	1.8%	0.6%	8.1%	0.7%	77.6%	11.2%
First had sexual intercourse before age 13 years old <sup>1,4</sup>	3.5%*	3.0%	2.2%	15.7%	0.7%	59.7%	18.7%
Had sex with 4 or more people in their life <sup>1,2,3,4</sup>	1.0%*	0.0%	5.3%	18.4%	0.0%	55.3%	21.1%
Had sex with at least one person in the past 3 months <sup>2,3</sup>	25.0%	1.9%	0.9%	8.2%	0.6%	76.3%	12.1%
Used alcohol or drugs the last time before sex <sup>2</sup>	5.1%	2.1%	1.0%	8.8%	0.5%	75.1%	12.4%
Used a condom when they last had sex <sup>1,2,3</sup>	15.2%	1.9%	0.2%	8.1%	1.0%	79.4%	9.3%
Did not use any method to prevent pregnancy when they last had sex	4.0%*	3.2%	1.3%	11.0%	1.3%	72.7%	10.4%
Have been or gotten someone pregnant at least once <sup>2</sup>	1.9%*	1.4%	2.7%	9.6%	1.4%	69.9%	15.1%
Had sexual contact with both males and females <sup>2,3</sup>	5.5%	1.0%	1.9%	3.8%	0.0%	79.5%	13.8%
Are non-heterosexual (LGBTQ+) <sup>3</sup>	16.5%	1.7%	0.6%	4.9%	0.5%	81.3%	11.0%
<b>Body Weight</b>							
Self-describe as slightly or very overweight <sup>3,4</sup>	37.2%	1.9%	1.0%	6.8%	0.6%	79.9%	9.7%
Not trying to do anything with their weight <sup>2,4</sup>	18.7%	0.6%	1.0%	6.2%	0.4%	81.9%	9.9%
Tried to lose or keep from gaining weight in the past 30 days by not eating, taking diet pills, vomiting, taking laxatives or skipping meals <sup>1,2,3</sup>	25.4%	2.2%	1.1%	5.8%	0.6%	80.2%	10.1%
<b>Dietary Behavior</b>							
Did not drink 100% fruit juice in the past 7 days <sup>1,3</sup>	37.3%	0.8%	1.3%	6.2%	0.3%	83.0%	8.4%
Did not eat fruit in the past 7 days	17.3%	0.8%	1.1%	10.1%	0.5%	77.4%	10.2%
Did not eat green salad in the past 7 days <sup>3</sup>	49.9%	1.1%	0.8%	8.4%	0.4%	78.0%	11.2%
Did not eat potatoes in the past 7 days <sup>2,3</sup>	39.1%	1.1%	0.8%	8.7%	0.2%	78.5%	10.7%
Did not eat carrots in the past 7 days <sup>1,3</sup>	59.7%	1.1%	0.9%	8.7%	0.3%	78.7%	10.2%
Did not eat other vegetables in the past 7 days	26.6%	1.1%	0.8%	8.8%	0.1%	77.5%	11.7%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.



Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (1.4%)	Asian (1.0%)	Black or African American (7.5%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (77.2%)	Multi-Race (10.2%)
Drank a soda or pop at least once per day in the past 7 days <sup>1,3</sup>	27.0%	1.3%	1.5%	10.2%	0.4%	76.2%	10.4%
Did not drink a glass of milk at least once in the past 7 days <sup>1,2,3</sup>	34.2%	1.5%	0.9%	10.6%	0.5%	76.0%	10.4%
Did not eat breakfast on at least 1 day during the past 7 days <sup>3</sup>	78.1%	1.4%	0.9%	7.9%	0.4%	79.1%	10.3%
<b>Physical Activity</b>							
Were active for 60 minutes per day less than 5 days in the past 7 days <sup>1,3,4</sup>	49.5%	1.8%	1.0%	9.3%	0.3%	77.3%	10.2%
Spent at least 3 hours a day in front of a TV, computer, other electronic device watching shows or videos playing games or on the internet on an average school day <sup>2,3</sup>	69.1%	1.3%	1.0%	7.5%	0.5%	79.0%	10.8%
Do not play on any sports teams in the past 12 months <sup>1,4</sup>	44.8%	1.7%	1.0%	9.4%	0.4%	76.8%	10.7%
Got a concussion from playing a sport or being active at least once in the past 12 months <sup>1,2,3</sup>	14.0%	1.9%	1.3%	10.6%	0.9%	73.3%	11.9%
<b>Other Health Topics/Miscellaneous</b>							
Have ever had sex education in school <sup>1,2,4</sup>	68.0%	1.0%	0.9%	5.9%	0.5%	81.0%	10.8%
At least sometimes went hungry because there wasn't enough food at home in the last 30 days <sup>1,3</sup>	10.3%	3.1%	1.0%	8.7%	0.3%	73.4%	13.6%
Have ever been tested for HIV <sup>1,2,3</sup>	5.1%	4.6%	1.0%	8.2%	0.5%	73.0%	12.8%
Have ever been tested for a STD other than HIV in the past 12 months <sup>1,2,3</sup>	4.3%*	3.7%	0.6%	9.1%	1.2%	72.0%	13.4%
Have not seen a dentist at least once in 12 months or more <sup>1,2</sup>	24.9%	2.0%	1.2%	11.4%	0.2%	73.0%	12.2%
Mental health was often not good at least most of the time during the past 30 days <sup>1,3,4</sup>	29.2%	1.0%	0.6%	5.3%	0.4%	82.4%	10.2%
Get 4 hours or less of sleep on a school night	11.3%	2.3%	1.2%	9.3%	0.2%	74.1%	12.8%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (1.4%)	Asian (1.0%)	Black or African American (7.5%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (77.2%)	Multi-Race (10.2%)
Slept somewhere else besides their parent/guardians, family member or friends house in the past 30 days <sup>1,2,3</sup>	5.7%	1.9%	3.3%	14.0%	0.5%	62.6%	17.8%
Did not have a usual place to sleep during the past 30 days <sup>3</sup>	0.4%*	0.0%	6.7%	6.7%	0.0%	66.7%	20.0%
Rarely or never felt safe and secure in their neighborhood <sup>1,3</sup>	6.3%	3.4%	1.3%	15.7%	0.0%	66.9%	12.7%

<sup>1</sup> Indicates a significant difference ( $p < 0.05$ ) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White) and the specified demographic/question.

<sup>2</sup> Indicates a significant difference ( $p < 0.05$ ) between ages ( $\leq 12$  years, 13 years, 14 years, 15 years, 16 years, 17 years, and  $\geq 18$  years old) and the specified demographic/question.

<sup>3</sup> Indicates a significant difference ( $p < 0.05$ ) between sexes (female and male) and the specified demographic/question.

<sup>4</sup> Indicates a significant difference ( $p < 0.05$ ) between ethnicity (Hispanic and Non-Hispanic) and the specified demographic/question.

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

## Appendix I: Weight Category Definitions

Weight categories are defined by BMI percentiles.

To see the CDC weight category definitions for children and adolescents, please visit the CDC website at:

[https://www.cdc.gov/growthcharts/clinical\\_charts.htm](https://www.cdc.gov/growthcharts/clinical_charts.htm)

### Record of Change

Version	Changes Made	Date	Name
1	YRBS Data analyzed and report created	12.3.2021	Brenna Heinle
1.1	Edits Made	12.22.2021	Brenna Heinle
1.2	Edits Made	1.21.2022	Brenna Heinle



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# CLARK COUNTY YOUTH RISK BEHAVIOR SURVEY

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## 2021 County-Wide Middle School Results



JANUARY 21, 2022

CLARK COUNTY COMBINED HEALTH DISTRICT  
529 East Home Road, Springfield, Ohio 45503

# Clark County Youth Risk Behavior Survey (YRBS) 2021

## County-Wide Middle School Results

### Version 1.2

### Introduction

The Youth Risk Behavior Survey (YRBS) is a survey that monitors health risk behaviors that contribute to the leading causes of death and disability among 7<sup>th</sup>-8<sup>th</sup> grade students. Topics include behaviors that contribute to unintentional injuries and violence, sexual behaviors, alcohol and drug use, tobacco use, dietary behaviors, physical activity, and the prevalence of obesity and asthma.

This report describes county-wide results of the High School YRBS that was administered in October 2021 by the Clark County Combined Health District in collaboration with each individual school district and school.

### Methods

A census was conducted on youth risk behavior with 2,419 students across 14 middle schools in Clark County:

Participating Schools	
Catholic Central Jr. High School	Northwestern Jr. High School
Global Impact Stem Academy (7-8)	Roosevelt Middle School
Greenon Jr. High School	Schaefer Middle School
Hayward Middle School	Shawnee Middle School
Nightingale Montessori (7-8)	Springfield City Online (7-8)
Northeastern Middle School	Southeastern Jr. High School
Northridge Middle School	Tecumseh Middle School

The survey was split into categories, including driving habits, violence and weapon carrying, sexual violence, bullying, depression and suicide, tobacco, alcohol, marijuana, drugs, sexual behavior, body weight, dietary behavior, physical activity, and miscellaneous topics.

The data collection method in this census was congruent with the CDC criteria for the YRBS, which suggests a two-stage, cluster sample design. The two-stage cluster sample design was achieved by first conducting a census of every school in the county, then randomly selecting classrooms from each school to analyze. **The middle school surveys were first administered in 2015; the surveys in 2015 and 2017 were not completed using the two-stage cluster sample design and 95% confidence interval, the data collected in this YRBS CANNOT be compared with results from the Clark County YRBS surveys administered in 2015 and 2017.**

All incomplete or invalid responses were removed. Survey answers that were logically inconsistent with one another were also removed. A weight based on student sex, race, ethnicity and grade was applied to each record to adjust for school and student nonresponse.

Demographic variables, including age, sex, race, ethnicity, grade, sexual orientation and gender identity, were reported. The percent (%) and 95% confidence interval were also reported for each question. Additionally, each response was analyzed by sex and race.

The overall response rate for the county-wide middle schools was 73.89%. The cutoff for a representative response rate was 60%, therefore this is considered a representative portion of the population.

**Key Findings: Demographics and Statistically Significant Questions (p<0.05)**

These key findings are labeled with Endnotes in the following pages.

The Endnotes are summarized as follows:

1. Indicates a significant difference (p<0.05) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White)
2. Indicates a significant difference (p<0.05) between ages (≤12 years, 13 years, 14 years, 15 years, 16 years, 17 years, and ≥18 years old)
3. Indicates a significant difference (p<0.05) between sexes (female and male)
4. Indicates a significant difference (p<0.05) between Ethnicity (Hispanic and Non-Hispanic)

**Results**

**Population Demographics**

Categories	Overall %	% of Overall Who Are: Sex (Overall %)	
		Female (48.4%)	Male (50.2%)
<b>Age of Students</b>			
10 years or younger	0.0%	0.0%	0.0%
11 years	0.3%	16.7%	83.3%
12 years	31.1%	51.2%	48.8%
13 years	50.8%	49.9%	50.1%
14 years	16.8%	44.3%	55.7%
15 years	0.9%	35.0%	65.0%
16 years or older	0.1%	0.0%	100.0%
NA or did not answer	0.0%	0.0%	0.0%
<b>Grade</b>			
6th grade <sup>2</sup>	0.0%	0.0%	0.0%
7th grade <sup>2</sup>	49.9%	48.3%	51.7%
8th grade <sup>2</sup>	50.0%	50.0%	50.0%
Ungraded or other <sup>2</sup>	0.1%	0.0%	100.0%
NA or did not answer <sup>2</sup>	0.0%	0.0%	0.0%
<b>Hispanic or Latino</b>			
Yes <sup>1,2</sup>	8.8%	47.6%	52.4%
No <sup>1,2</sup>	88.3%	49.6%	50.4%
NA or did not answer <sup>1,2</sup>	2.8%	38.3%	61.7%
<b>Race</b>			
Multi-race <sup>4</sup>	11.3%	54.8%	45.2%
American Indian or Alaska Native <sup>4</sup>	0.9%	40.0%	60.0%
Asian <sup>4</sup>	0.5%	30.0%	70.0%
Black or African American <sup>4</sup>	12.0%	47.0%	53.0%
Native Hawaiian or Other Pacific Islander <sup>4</sup>	0.5%	44.4%	55.6%
White <sup>4</sup>	71.3%	48.9%	51.1%
NA or did not answer <sup>4</sup>	3.6%	47.4%	52.6%

Categories	Overall %	% of Overall Who Are: Sex (Overall %)	
		Female (48.4%)	Male (50.2%)
<b>Sex</b>			
Female	48.4%	-	-
Male	50.2%	-	-
NA or did not answer	1.4%	-	-
<b>Gender Identity</b>			
Transgender <sup>3</sup>	3.3%	49.2%	50.8%
Not Transgender <sup>3</sup>	89.4%	48.0%	52.0%
Unsure if Transgender <sup>3</sup>	4.5%	67.8%	32.2%
Do not know what the question is asking <sup>3</sup>	2.3%	50.0%	50.0%
NA or did not answer <sup>3</sup>	0.5%	77.8%	22.2%

<sup>1</sup>Indicates a significant difference ( $p < 0.05$ ) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White) and the specified demographic/question.

<sup>2</sup>Indicates a significant difference ( $p < 0.05$ ) between ages ( $\leq 12$  years, 13 years, 14 years, 15 years, 16 years, 17 years, and  $\geq 18$  years old) and the specified demographic/question.

<sup>3</sup>Indicates a significant difference ( $p < 0.05$ ) between sexes (female and male) and the specified demographic/question.

<sup>4</sup>Indicates a significant difference ( $p < 0.05$ ) between ethnicity (Hispanic and Non-Hispanic) and the specified demographic/question.

Behavior Data

Questions	Overall % (95% Confidence Interval)	% of Overall Who Are: Sex (Overall %)	
		Female (48.4%)	Male (50.2%)
<b>COVID-19 Pandemic</b>			
Mental health was most of the time or always not good during the COVID-19 Pandemic <sup>1,3</sup>	26.4% (24.6-28.2%)	69.7%	30.3%
Parent or other adult in their home lost their job, even for a short amount of time, during the COVID-19 Pandemic <sup>3</sup>	18.3% (16.7-19.9%)	54.5%	45.5%
<b>Safety</b>			
Rarely or never wore a helmet when riding a bicycle <sup>2</sup>	71.0% (69.0-72.9%)	47.9%	52.1%
Rarely or never wore a helmet when rollerblading or riding a skateboard <sup>3</sup>	43.3% (41.3-45.4%)	55.2%	44.8%
Rarely or never wore a seat belt when riding a car driven by someone else <sup>1,2,3</sup>	6.2% (5.2-7.2%)	38.2%	61.8%
Have rode in a car driven by someone who had been drinking alcohol <sup>2,3</sup>	18.7% (17.1-20.4%)	63.0%	37.0%
<b>Violence</b>			
Have been involved in a physical fight <sup>1,2,3</sup>	44.3% (42.1-46.3%)	36.4%	63.6%
Seen someone get physically attacked, beaten, stabbed, or shot in their neighborhood <sup>1,2</sup>	25.2% (23.2-27.0%)	49.4%	50.6%
Forced by anyone into doing sexual things at least once in the past 12 months <sup>3,4</sup>	18.1% (16.6-19.8%)	67.6%	32.4%
Have been physically hurt by a parent or other adult in their home at least sometimes in their life <sup>3</sup>	7.9% (6.8-9.1%)	65.3%	34.7%
<b>Bullying</b>			
Bullied on school property <sup>1,3</sup>	43.1% (41.1-45.3%)	57.2%	42.8%
Electronically bullied (Facebook, Instagram, texting) <sup>1,3</sup>	33.8% (31.7-35.8%)	62.9%	37.1%
Victim of teasing or name calling because of race or ethnic background in the past 12 months <sup>1,2,3,4</sup>	17.3% (15.7-19.0%)	59.1%	40.9%
<b>Suicide, Hurting Oneself</b>			
Hurt themselves without wanting to kill themselves at least once in the past 12 months <sup>1,3,4</sup>	25.3% (23.5-27.2%)	68.7%	31.3%
Seriously thought about killing yourself (suicide) <sup>1,3</sup>	26.3% (24.5-28.3%)	66.6%	33.4%
Made a plan to attempt to kill yourself (suicide) <sup>1,3</sup>	18.8% (17.2-20.6%)	66.9%	33.1%
Attempted to kill yourself (suicide) <sup>1,2,3,4</sup>	11.0% (9.7-12.3%)	65.2%	34.8%
<b>Tobacco</b>			
Tried smoking a cigarette <sup>2,4</sup>	10.7% (9.3-12.1%)	51.8%	48.2%
Smoked a cigarette before age 10 years old	3.4% (2.7-4.2%)	58.3%	41.7%
Smoked cigarettes at least 1 day in the past 30 days <sup>2,4</sup>	3.0% (2.3-3.8%)	40.6%	59.4%



Questions	Overall % (95% Confidence Interval)	% of Overall Who Are: Sex (Overall %)	
		Female (48.4%)	Male (50.2%)
Smoked cigarettes at least 20 days in the past 30 days	0.4% (0.1-0.7%)	25.0%	75.0%
Smoked at least 1 cigarette per day in the past 30 days <sup>1,2,4</sup>	3.7% (2.9-4.5%)	35.9%	64.1%
Used an electronic vapor product <sup>2,3,4</sup>	16.8% (15.2-18.4%)	58.0%	42.0%
Smoked an electronic vapor product at least once in the past 30 days <sup>2,3,4</sup>	10.6% (9.2-11.8%)	57.1%	42.9%
Used chewing tobacco, snuff, snus, etc. 1 day or more in the past 30 days <sup>3,4</sup>	2.0% (1.4-2.6%)	33.3%	66.7%
Smoked cigars, cigarillos, or little cigars on 1 day or more in the past 30 days <sup>2,4</sup>	2.6% (2.0-3.3%)	36.4%	63.6%
<b>Alcohol</b>			
Had least one drink of alcohol <sup>1,2,3,4</sup>	20.7% (18.9-22.4%)	54.8%	45.2%
Had their first drink of alcohol before age 10 years old <sup>2</sup>	4.9% (4.1-5.9%)	53.3%	46.7%
<b>Marijuana</b>			
Have used marijuana at least once in their life <sup>2,3,4</sup>	8.4% (7.1-9.5%)	56.4%	43.6%
Tried marijuana for the first time before age 10 years old <sup>4</sup>	0.9% (0.6-1.4%)	50.0%	50.0%
<b>Drugs</b>			
Have taken non-prescribed pain medication or misused it at least once in their life <sup>1,2,3,4</sup>	10.0% (8.8-11.3%)	61.1%	38.9%
Have used any form of cocaine at least once in their life	0.6% (0.3-0.9%)	36.4%	63.6%
Have sniffed glue, aerosols, paints to get high at least once in their life <sup>3</sup>	3.5% (2.8-4.4%)	62.2%	37.8%
Lived with someone who was having a problem with alcohol or drug use <sup>1,2,3</sup>	25.4% (23.6-27.3%)	59.4%	40.6%
<b>Sexual Behavior</b>			
Have had sexual intercourse <sup>2,4</sup>	5.7% (4.8-6.8%)	41.0%	59.0%
First had sexual intercourse before age 10 years old	1.1% (0.7-1.5%)	47.8%	52.2%
Had sex with 4 or more people in their life <sup>2</sup>	0.5% (0.2-0.8%)	30.0%	70.0%
Used a condom when they last had sex <sup>2</sup>	2.6% (2.0-3.4%)	39.3%	60.7%
<b>Body Weight</b>			
Self-describe as slightly or very overweight <sup>3</sup>	34.4% (32.4-36.4%)	53.3%	46.7%
Not trying to do anything with their weight <sup>1,4</sup>	22.6% (20.8-24.3%)	51.7%	48.3%
Tried to lose or keep from gaining weight in the past 30 days by not eating, taking diet pills, vomiting, taking laxatives or skipping meals <sup>1,2,3</sup>	22.6% (20.9-24.5%)	73.8%	26.2%
<b>Dietary Behavior</b>			
Did not eat breakfast on at least 1 day in the past 7 days <sup>3</sup>	72.1% (70.2-74.1%)	55.3%	44.7%

Questions	Overall % (95% Confidence Interval)	% of Overall Who Are: Sex (Overall %)	
		Female (48.4%)	Male (50.2%)
<b>Physical Activity</b>			
Were active for 60 minutes per day less than 5 days in the past 7 days <sup>3</sup>	45.2% (43.0-47.3%)	54.3%	45.7%
Spent at least 3 hours a day in front of a TV, computer, other electronic device watching shows or videos playing games or on the internet on an average school day <sup>1,3</sup>	67.4% (65.5-69.4%)	51.4%	48.6%
Did not go to PE classes at school in an average week <sup>1,4</sup>	57.0% (54.9-59.1%)	50.7%	49.3%
Do not play on any sports teams in the past 12 months <sup>1,4</sup>	45.1% (42.9-47.1%)	49.2%	50.8%
Got a concussion from playing a sport or being active at least once in the past 12 months <sup>1,2</sup>	16.3% (14.7-17.9%)	44.9%	55.1%
<b>Other Health Topics/Miscellaneous</b>			
Mental health was often not good at least most of the time during the past 30 days <sup>1,3</sup>	21.4% (19.7-23.2%)	72.0%	28.0%
Often felt at least most of the time that they were able to talk to an adult about their feelings <sup>2,3</sup>	17.0% (15.4-18.6%)	42.7%	57.3%
Get 4 hours or less of sleep on a school night <sup>2,3</sup>	12.2% (10.8-13.6%)	60.2%	39.8%
Slept somewhere else besides their parent/guardians, family member or friends house in the past 30 days <sup>1,2</sup>	4.6% (3.7-5.5%)	54.6%	45.4%
Did not have a usual place to sleep during the past 30 days <sup>3</sup>	0.7% (0.4-1.1%)	21.4%	78.6%
Have ever had sex education in school <sup>2,3</sup>	14.4% (12.9-15.9%)	43.6%	56.4%
At least sometimes went hungry because there wasn't enough food at home in the last 30 days <sup>1</sup>	8.3% (7.2-9.6%)	54.0%	46.0%
Rarely or never felt safe and secure in their neighborhood	7.3% (6.3-8.5%)	51.7%	48.3%

<sup>1</sup> Indicates a significant difference (p<0.05) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White) and the specified demographic/question.

<sup>2</sup> Indicates a significant difference (p<0.05) between ages (≤12 years, 13 years, 14 years, 15 years, 16 years, 17 years, and ≥18 years old) and the specified demographic/question.

<sup>3</sup> Indicates a significant difference (p<0.05) between sexes (female and male) and the specified demographic/question.

<sup>4</sup> Indicates a significant difference (p<0.05) between ethnicity (Hispanic and Non-Hispanic) and the specified demographic/question.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (0.9%)	Asian (0.5%)	Black or African American (12.0%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (71.3%)	Multi-Race (11.3%)
<b>COVID-19 Pandemic</b>							
Mental health was most of the time or always not good during the COVID-19 Pandemic <sup>1,3</sup>	26.4%	1.4%	0.2%	8.9%	0.0%	74.7%	14.8%
Parent or other adult in their home lost their job, even for a short amount of time, during the COVID-19 Pandemic <sup>3</sup>	18.3%	0.8%	0.0%	11.7%	0.8%	71.1%	15.6%
<b>Safety</b>							
Rarely or never wore a helmet when riding a bicycle <sup>2</sup>	71.0%	1.0%	0.5%	12.7%	0.3%	73.1%	12.4%
Rarely or never wore a helmet when rollerblading or riding a skateboard <sup>3</sup>	43.3%	0.9%	0.3%	12.0%	0.2%	73.4%	13.1%
Rarely or never wore a seat belt when riding a car driven by someone else <sup>1,2,3</sup>	6.2%	2.3%	2.3%	24.2%	1.6%	57.0%	12.5%
Have rode in a car driven by someone who had been drinking alcohol <sup>2,3</sup>	18.7%	0.3%	0.8%	11.9%	0.0%	70.8%	16.3%
<b>Violence</b>							
Have been involved in a physical fight <sup>1,2,3</sup>	44.3%	1.5%	0.4%	19.3%	0.2%	64.3%	14.3%
Seen someone get physically attacked, beaten, stabbed, or shot in their neighborhood <sup>1,2</sup>	25.2%	1.1%	0.2%	20.0%	0.2%	61.3%	17.2%
Forced by anyone into doing sexual things at least once in the past 12 months <sup>3,4</sup>	18.1%	0.6%	0.8%	13.1%	0.3%	72.2%	13.1%
Have been physically hurt by a parent or other adult in their home at least sometimes in their life <sup>3</sup>	7.9%	1.2%	0.6%	15.4%	0.0%	67.3%	15.4%
<b>Bullying</b>							
Bullied on school property <sup>1,3</sup>	43.1%	0.7%	0.4%	8.9%	0.3%	76.7%	13.0%
Electronically bullied (Facebook, Instagram, texting) <sup>1,3</sup>	33.8%	0.6%	0.6%	9.0%	0.3%	75.0%	14.5%
Victim of teasing or name calling because of race or ethnic background in the past 12 months <sup>1,2,3,4</sup>	17.3%	0.6%	1.4%	18.9%	0.6%	57.2%	21.4%

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (0.9%)	Asian (0.5%)	Black or African American (12.0%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (71.3%)	Multi-Race (11.3%)
<b>Suicide, Hurting Oneself</b>							
Hurt themselves without wanting to kill themselves at least once in the past 12 months <sup>1,3,4</sup>	25.3%	1.0%	0.4%	9.9%	0.2%	72.8%	15.8%
Seriously thought about killing yourself (suicide) <sup>1,3</sup>	26.3%	0.7%	0.4%	14.1%	0.0%	67.9%	17.0%
Made a plan to attempt to kill yourself (suicide) <sup>1,3</sup>	18.8%	0.8%	0.3%	12.0%	0.0%	70.4%	16.5%
Attempted to kill yourself (suicide) <sup>1,2,3,4</sup>	11.0%	0.0%	0.5%	15.1%	0.0%	67.6%	16.9%
<b>Tobacco</b>							
Tried smoking a cigarette <sup>2,4</sup>	10.7%	0.9%	0.9%	10.2%	0.5%	75.3%	12.1%
Smoked a cigarette before age 10 years old	3.4%*	0.0%	2.8%	9.7%	0.0%	72.2%	15.3%
Smoked cigarettes at least 1 day in the past 30 days <sup>2,4</sup>	3.0%*	0.0%	0.0%	10.9%	0.0%	76.4%	12.7%
Smoked cigarettes at least 20 days in the past 30 days	0.4%*	0.0%	0.0%	0.0%	0.0%	87.5%	12.5%
Smoked at least 1 cigarette per day in the past 30 days <sup>1,2,4</sup>	3.7%*	0.0%	0.0%	7.4%	0.0%	79.4%	13.2%
Used an electronic vapor product <sup>2,3,4</sup>	16.8%	0.6%	0.6%	11.6%	0.3%	74.4%	12.5%
Smoked an electronic vapor product at least once in the past 30 days <sup>2,3,4</sup>	10.6%	1.0%	0.5%	13.9%	0.5%	71.6%	12.5%
Used chewing tobacco, snuff, snus, etc. 1 day or more in the past 30 days <sup>3,4</sup>	2.0%*	0.0%	0.0%	14.7%	0.0%	70.6%	14.7%
Smoked cigars, cigarillos, or little cigars on 1 day or more in the past 30 days <sup>2,4</sup>	2.6%*	0.0%	0.0%	8.5%	0.0%	80.9%	10.6%
<b>Alcohol</b>							
Had least one drink of alcohol <sup>1,2,3,4</sup>	20.7%	1.4%	0.5%	9.5%	0.0%	73.3%	15.2%
Had their first drink of alcohol before age 10 years old <sup>2</sup>	4.9%*	2.0%	2.0%	10.9%	0.0%	68.3%	16.8%
<b>Marijuana</b>							
Have used marijuana at least once in their life <sup>2,3,4</sup>	8.4%	0.0%	0.6%	14.6%	0.6%	69.5%	14.6%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (0.9%)	Asian (0.5%)	Black or African American (12.0%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (71.3%)	Multi-Race (11.3%)
Tried marijuana for the first time before age 10 years old <sup>4</sup>	0.9%*	0.0%	0.0%	20.0%	0.0%	65.0%	15.0%
<b>Drugs</b>							
Have taken non-prescribed pain medication or misused it at least once in their life <sup>1,2,3,4</sup>	10.0%	1.5%	0.0%	19.6%	0.5%	61.8%	16.7%
Have used any form of cocaine at least once in their life	0.6%*	0.0%	0.0%	16.7%	0.0%	75.0%	8.3%
Have sniffed glue, aerosols, paints to get high at least once in their life <sup>3</sup>	3.5%*	0.0%	0.0%	13.3%	0.0%	68.0%	18.7%
Lived with someone who was having a problem with alcohol or drug use <sup>1,2,3</sup>	25.4%	0.6%	0.6%	8.6%	0.2%	75.0%	15.0%
<b>Sexual Behavior</b>							
Have had sexual intercourse <sup>2,4</sup>	5.7%	0.9%	0.9%	17.4%	0.0%	64.3%	16.5%
First had sexual intercourse before age 10 years old	1.1%	0.0%	0.0%	13.0%	0.0%	73.9%	13.0%
Had sex with 4 or more people in their life <sup>2</sup>	0.5%*	0.0%	0.0%	10.0%	0.0%	70.0%	20.0%
Used a condom when they last had sex <sup>2</sup>	2.6%*	0.0%	2.0%	21.6%	0.0%	58.8%	17.6%
<b>Body Weight</b>							
Self-describe as slightly or very overweight <sup>3</sup>	34.4%	0.8%	0.4%	10.8%	0.4%	75.5%	12.1%
Not trying to do anything with their weight <sup>1,4</sup>	22.6%	0.4%	1.1%	9.4%	0.2%	80.0%	8.9%
Tried to lose or keep from gaining weight in the past 30 days by not eating, taking diet pills, vomiting, taking laxatives or skipping meals <sup>1,2,3</sup>	22.6%	0.2%	0.2%	12.6%	0.4%	71.2%	15.4%
<b>Dietary Behavior</b>							
Did not eat breakfast on at least 1 day in the past 7 days <sup>3</sup>	72.1%	0.9%	0.5%	12.0%	0.4%	73.5%	12.6%
<b>Physical Activity</b>							
Were active for 60 minutes per day less than 5 days in the past 7 days <sup>3</sup>	45.2%	1.0%	0.7%	13.0%	0.5%	72.7%	12.0%

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

Questions	Overall %	% of Overall Who Are: Race (Overall %)					
		American Indian or Alaskan Native (0.9%)	Asian (0.5%)	Black or African American (12.0%)	Native Hawaiian or Other Pacific Islander (0.5%)	White (71.3%)	Multi-Race (11.3%)
Spent at least 3 hours a day in front of a TV, computer, other electronic device watching shows or videos playing games or on the internet on an average school day <sup>1,3</sup>	67.4%	0.8%	0.5%	12.7%	0.4%	72.6%	13.1%
Did not go to PE classes at school in an average week <sup>1,4</sup>	57.0%	0.9%	0.6%	9.9%	0.7%	75.8%	12.2%
Do not play on any sports teams in the past 12 months <sup>1,4</sup>	45.1%	1.1%	1.0%	13.1%	0.9%	73.0%	11.0%
Got a concussion from playing a sport or being active at least once in the past 12 months <sup>1,2</sup>	16.3%	0.9%	0.9%	21.1%	0.6%	64.8%	11.7%
<b>Other Health Topics/Miscellaneous</b>							
Mental health was often not good at least most of the time during the past 30 days <sup>1,3</sup>	21.4%	0.9%	0.7%	8.2%	0.0%	76.2%	14.0%
Often felt at least most of the time that they were able to talk to an adult about their feelings <sup>2,3</sup>	17.0%	0.3%	0.6%	8.8%	0.3%	79.8%	10.3%
Get 4 hours or less of sleep on a school night <sup>2,3</sup>	12.2%	1.6%	0.8%	14.1%	0.0%	71.0%	12.5%
Slept somewhere else besides their parent/guardians, family member or friends house in the past 30 days <sup>1,2</sup>	4.6%*	0.0%	0.0%	27.2%	0.0%	65.2%	7.6%
Did not have a usual place to sleep during the past 30 days <sup>3</sup>	0.7%*	0.0%	0.0%	7.1%	0.0%	85.7%	7.1%
Have ever had sex education in school <sup>2,3</sup>	14.4%	0.7%	1.0%	10.0%	0.7%	77.3%	10.4%
At least sometimes went hungry because there wasn't enough food at home in the last 30 days <sup>1</sup>	8.3%	0.0%	1.7%	19.5%	0.6%	66.7%	11.5%
Rarely or never felt safe and secure in their neighborhood	7.3%	1.9%	1.3%	15.9%	0.6%	66.2%	14.0%

<sup>1</sup> Indicates a significant difference (p<0.05) between races (Multi-race, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, and White) and the specified demographic/question.

<sup>2</sup> Indicates a significant difference (p<0.05) between ages (≤12 years, 13 years, 14 years, 15 years, 16 years, 17 years, and ≥18 years old) and the specified demographic/question.

<sup>3</sup> Indicates a significant difference (p<0.05) between sexes (female and male) and the specified demographic/question.

<sup>4</sup> Indicates a significant difference (p<0.05) between ethnicity (Hispanic and Non-Hispanic) and the specified demographic/question.

\*Overall % is less than 5%, so the race breakdown might be skewed higher for some races due to the small sample size.

For questions, contact [bheinle@ccchd.com](mailto:bheinle@ccchd.com)

**Record of Change**

<b>Version</b>	<b>Changes Made</b>	<b>Date</b>	<b>Name</b>
1	YRBS Data analyzed and report created	12/8/2021	Brenna Heinle
1.1	Edits Made	12/22/2021	Brenna Heinle
1.2	Edits Made	1/21/2022	Brenna Heinle



2728 Dale Avenue, Springfield Township

February 28, 2022

Photos: Larry Shaffer, Clark County Combined Health District



**Clark County Combined Health District (CCCHD)**  
**Division of Environmental Health**  
**529 E. Home Road**  
**Springfield, Ohio 45503**  
**Phone: 937-390-5600 Fax: 937-390-5625**

**Application for Sewage Variance**

**Permit Fee \$25.00**      **Receipt #: 50839**

Address of Site <b>5386 Eron Xenia Rd.</b>	City <b>Fairborn</b>	State <b>OH</b>	Zip <b>45324</b>
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<b>Owner Information:</b>			
Name <b>Vanessa &amp; Zachary Frederick</b>			
Address <b>5386 Eron Xenia Rd.</b>	City <b>Fairborn</b>	State <b>OH</b>	Zip <b>45324</b>
Email address: <b>vfederick247@gmail.com</b>	Cell Phone Number: <b>937-308-5803</b>		


<b>Insert below, all sections of sewage code from which you are requesting a variance.</b>
<b>3701-29-06(F) - A SIS shall use soil absorption as the means for final disposal and/or treatment...</b>

<b>Provide a concise description of the conditions, which prevent compliance with above code(s).</b>
<b>Soils suitable for onsite treatment are ~300' from house and would need to bore through bedrock to get to the area.</b>

By signing this application, I, the grantee, agree to abide by any and all state laws and regulations and by the regulations set forth by the Clark County Combined Health District.

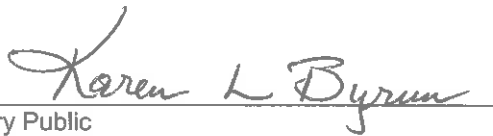
I, the grantee, herein further acknowledge that I obtained a variance from the Clark County Combined Health District Board of Health, said variance permitting me to install a sewage system that does not meet the minimum state code.

In consideration for said variance, I hereby agree and promise that I will hold harmless and indemnify the Clark County Combined Health District Board of Health, the Clark County Combined Health District and/or any and all members of said Board and/or said District, including all employees and/or agents thereof, from any and all damages which might be caused directly or indirectly from this installation.

Owner Signature 	Date 2/28/22
Witness #1 Signature	Witness #2 Signature

**Notary Use Only:**

In testimony whereof, I have hereunto set my hand and official seal at Enon, Ohio, this 28 day of February, 2022

  
Notary Public



KAREN L BYRUM  
Notary Public  
State of Ohio  
My Comm. Expires  
December 26, 2026

My commission expires: 12-26-2026

**Health Department Use Only:**

Variance Approved by the Clark County Combined Health District Board of Health - Yes  No

Resolution Number: \_\_\_\_\_ Approval Date: \_\_\_\_\_

**Stevenson Utilities Construction, LLC**  
 PO Box 2617 2856 Upper Valley Pk  
 Springfield, OH 45501 US  
 (937)322-4535  
 joy@dgstevenson.com  
 www.dgstevenson.com

# Estimate



**ADDRESS**  
 Zach Webster

ESTIMATE #	DATE	EXPIRATION DATE
2400	02/17/2022	03/17/2022

**SITE ADDRESS**  
 5386 Enon Xenia Rd

ACTIVITY	QTY	RATE	AMOUNT
Zach Fredrick 5386 Enon -Xenia Rd Fairborn, Ohio 45324 <b>Services</b> Mobilization	1	500.00	500.00
<b>h</b> Horizontal directional drill (HDD) in rock for 1.5 inch sewer line to leach field	300	85.00	25,500.00
Please sign and either fax or email back the estimate at 937-322-4535 or email brian@dgstevenson.com	<b>TOTAL</b>		<b>\$26,000.00</b>

Accepted By

Accepted Date



**Deaton Soil Services, LLC**  
1427 Concord Fairhaven Rd.  
Eaton, OH 45320  
Cell: (937) 533-9991

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Friday, January 14, 2022

Zachary Frederick  
5386 Enon Xenia Rd.  
Fairborn, Ohio 45324

Dear Mr. Frederick,

Enclosed you will find the requested soil evaluation for the property at 5386 Enon Xenia Road in Clark County Ohio. The soil evaluation was the result from the need for a potential replacement sewage treatment system for the existing home.

Approximately 40 soil borings, were conducted at the proposed location.

In the packet, a site map marking the locations of the sample sites and challenges on the property and this letter. Copies of this packet should be submitted to the Clark County Health Department. The Health Department will make the determination as to whether the soil and site area is suitable for onsite sewage treatment.

Most of the soils on this property, especially the soil on the steeper slopes contains bedrock that is less than 12 inches from the surface. Several bedrock exposures can be seen throughout the yard (at the surface). There are some better soils at the far eastern boundary of the property, (~350 feet away), but getting to that area may be cost prohibitive because of the rock and boring through that area. A contractor was checking into the cost of that.

If getting to the area at the eastern portion of the property is cost prohibitive, an NPDES system may be necessary.

If you have any questions, concerns, or need clarification, please feel free to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew H. Deaton".

Matthew H. Deaton - Certified Professional Soil Scientist

# Zachary Frederick - Soil Evaluation 5386 Enon Xenia Rd. Fairborn, Ohio



- Proposed treatment area
- Pedon Descriptions
- Property boundary - from GIS



Prepared by:  
Matthew Deaton 1/3/2022





**Clark County Combined Health District**  
 Divisions: All Divisions of Clark County Combined Health District (CCCHD)

Public Health Ethics Reviews

529 E. Home Road  
 Springfield, OH 45503

**CCCHD Public Health Ethics Review Tool**

Date of Review Meeting:	3/10/2022
Attendees by Name and Title	Elizabeth DeWitt, Environmental health Supervisor Larry Shaffer; Environmental Health District Director
Area of Discussion:	Variance request from Ohio's Household Sewage Treatment System rule: 3701-29-06 (F) 5386 Enon-Xenia, Fairborn, OH - Parcel #1801000005000011

Principles of Ethical Public Health Practice	Principles Applied to Program Level	Principles Applied to Specific Event
1. Address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.	Prevent humans and animals from contact with untreated sewage; abate all sewage nuisance conditions; treat all off lot discharges to the levels required by the NPDES permit.	Treats sewage before discharge to surface
2. Achieve community health in a way that respects the rights of individuals in the community.	Consider keeping treated or untreated sewage onsite, eliminating discharging and mechanical systems if possible and practical.	Treat sewage onsite to provide for safety of surface and ground water
3. Policies, programs, and priorities should be developed and evaluated through processes that ensure an opportunity for input from community.	As this is implementation of state law and rule- public input has occurred at the state level. The Board of Health consideration of variances occurs in a public meeting with input from the community.	Board of Health Meeting; March 17, 2022
4. Advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions for health are accessible to all.	The law and rules allows for a "hardship" or financial consideration when making the variance decisions.	The Board may consider financial situation or other difficulty as a viable reason for a variance.
5. Seek the information needed to implement effective policies and programs that protect and promote health.	Not applicable- State Law and Rules.	N/A
6. Provide communities with the information they have that is needed for decisions on policies and programs	Not applicable- State Law and Rules.	N/A



**Clark County Combined Health District**  
 Divisions: All Divisions of Clark County Combined Health District (CCCHD)

Public Health Ethics Reviews

529 E. Home Road  
 Springfield, OH 45503

<b>Principles of Ethical Public Health Practice</b>	<b>Principles Applied to Program Level</b>	<b>Principles Applied to Specific Event</b>
and should obtain the community's consent.		
7. Act in a timely manner on the information they have within the resources and the mandate given to them by the public.	Process variance request ASAP and take to the next Board of Health meeting for their consideration.	Received request for variance March 4, 2022
8. Programs and policies should incorporate a variety of approaches that anticipate and respect the diverse values, beliefs and cultures in the community.	Not applicable- State Law and Rules.	N/A
9. Programs and policies should be implemented in a manner that most enhances the physical and social environment.	Consideration should be given to the surrounding terrain and the variances impact on the neighboring properties as well as the owner's property.	N/A in this situation; no visible mound
10. Protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of high likelihood of significant harm to the individual or others.	Not applicable- no confidential information.	N/A
11 . CCCHD should ensure the professional competence of its employees.	Professional development and training must occur and documentation uploaded into the Workforce Development database.	Staff attend seminars as available; monthly sewage conference calls
12. CCCHD and its employees should engage in collaborations and affiliations that build the public's trust and the institution's effectiveness.	Township trustees, county commissioners, village council members, realtors and mortgage bankers, builders, installers and pumpers should all be educated and regularly informed of the implementation of the rules.	Mad River Township Trustees have been advised of the request for variance and requested to comment.



**Clark County Combined Health District**  
Divisions: All Divisions of Clark County Combined Health District (CCCHD)

Public Health Ethics Reviews

529 E. Home Road  
Springfield, OH 45503

<b>Next Steps:</b>			
<b>Objective</b>	<b>Related Activities</b>	<b>Timeframe</b>	<b>Responsible Party</b>
Ensure compliance with conditions of the variance is passed.	Perform on-site inspections as needed.	By project's completion.	Environmental Health Staff